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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

2009

Open to Public Inspection

		pplicable Please	C Name of organization	_	0	D Employer id	dentification number
_	Iress ch	· · · · · · · · · · · · · · · · · · ·	Indiana Soybean Alliance Inc			35-20263	
☐ Nar	me cha		Doing Business As			E Telephone i	
Init	ıal retu		Number and street (or P O b	ox if mail is not delivered to street addre	ss) Room/suite	(317) 347	- 3620 :s \$ 14,976,672
Ter	mınate		5730 West 74th Street			<b>G</b> Gloss lecelpt	.5 \$ 14,970,072
☐ Am	ended	return	City or town, state or country Indianapolis, IN 46278	, and ZIP + 4	•		
App	olication	n pending	Indianapolis, IV 10270				
			ime and address of principal Walker	lofficer		- ıs a group retu	
		•	West 74th Street		affilia 	ites?	⊤Yes <b>√</b> No
		Indiar	napolis, IN 46278		H(b) Are al	II affiliates inclu	ided?
	x-exem	npt status 🔽 5010	c) ( 6 ) <b>4</b> (insert no )	(a)(1) or			t (see instructions)
		: F indianasoybe		(4)(1) (1) (2)	<b>H(c)</b> Grou	ıp exemption r	umber <del>F</del>
			ation Trust Association C	Other ►	L Year of fo	rmation 1997	M State of legal domicile IN
_	rt I						
Governance	1	To carry out the S Congress as a Q	ualified State Soybean Boar	ch, Consumer Information (SPAR) d (QSSB) for the State of Indiana farmers with promotional, educati	and to serve	the Organizati	on's members on policy
Gove	2	Check this box		ntinued its operations or disposed	of more than	25% of its net	assets
	3		•	oody (Part VI, line 1a)			324
Activities &	4			e governing body (Part VI, line 1t			4 24
Ę	5	Total number of e	employees (Part V , line 2a)				52:
¥	6	Total number of v	olunteers (estimate if neces	ssary)			634
				Part VIII, column (C), line 12	•		<b>76</b> 7,239
	Ь	Net unrelated bus	siness taxable income from	Form 990-T, line 34	<del></del>		<b>7b</b> 1,175
	8	Contributions	nd grants (Part VIII, line 1h	Prio	80,094	Current Year 89,085	
≘	9		e revenue (Part VIII, line 11)		13,656,765	13,794,472	
Rayenue	10	-	•	lines 3, 4, and 7d)		126,661	70,259
æ	11			5, 6d, 8c, 9c, 10c, and 11e)		208,469	939,663
	12		add lines 8 through 11 (mus	e	14,071,989	14,893,479	
	13			olumn (A), lines 1-3)		712,520	1,024,403
	14			lumn (A), line 4)		, 12,020	0
ďδ	15		compensation, employee be	nefits (Part IX, column (A), lines 5	5-	1 2 1 2 2 7 2	
Expenses	16-	10)	dunian fana (Dawt IV. anlin	(A) line 11-)		1,243,878	1,554,457
क <del>⊜</del>	16a b			mn (A), line 11e)			0
Д	17	=	penses (Part IX, column (D), line (Part IX, column (Δ), lines	25) F <sup>3</sup> 11a-11d, 11f-24f)		10,448,270	10,162,593
	18	•		ual Part IX, column (A), line 25)		12,404,668	12,741,453
	19	·		om line 12		1,667,321	2,152,026
Net Assets or Fund Balances					_	g of Current Year	End of Year
SS et	20	Total assets (Pa	art X, line 16)			7,256,501	9,188,616
Pt A	21	Total liabilities	(Part X, line 26)			1,138,422	926,461
	22		ınd balances Subtract line 2	21 from line 20		6,118,079	8,262,155
Pai	rt II	Signature B					
				nined this return, including accompanying on of preparer (other than officer) is base			
Sign Here		***** Signature of office	cer	2011- Date	01-28		
		Tony Walker Ser Type or print nai	nior Director of Finance & Admin me and title				
		<b>                                    </b>		Date	Check If	Preparer's iden	tifying number
Paid		Preparer's signature ANITA	A W SHERMAN		self- empolyed •	(see instruction	
Prepa	arer's	Firm's name (or you	irs GREENWALT CPAS INC			EIN Þ	
Use (	Only	if self-employed), address, and ZIP + 4	4 5342 W VERMONT STREET		LIN F		
_	_		INDIANAPOLIS, IN 46224			Phone no 🕨	(317) 241-2999
Mayt	he IR	S discuss this ret	· · · · · · · · · · · · · · · · · · ·	above? (see instructions)			┌Yes ┌No

### Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

To carry out the Soybean Promotion, Research, Consumer Information (SPARC) Act and Order, passed by the United States Congress as a Qualified State Soybean Board (QSSB) for the State of Indiana and to serve the Organization's members on policy issues and representing all Indiana soybean farmers with promotional, educational and research activities

2			rogram services during the year		
	the prior Form 990 or 99 If "Yes," describe these r				┌ Yes ┌ No
3	Did the organization ceas	se conducting, or make	significant changes in how it cor	nducts, any program	「Yes ▼ No
	If "Yes," describe these o				
4	Section 501(c)(3) and 50	D1(c)(4) organizations	each of the organization's three l and section 4947(a)(1) trusts ai evenue, if any, for each program s	re required to report the am	
4a	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
	See schedule O				
4b	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
4c	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
4d	Other program services (Expenses \$	•	e O ) g grants of \$	) (Revenue \$	)
4 -			y grants or p	/ (Nevenue p	,
4e	Total program service e	xpenses <b>F</b> -\$			

art TV	Checkli	ist of	Dequired	Schedules
	CHECKI	ISL UI	Reuulleu	<b>Scheuule</b> :

			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		Νο
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
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		Νο
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	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or 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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νο
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		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10		Νo
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D,  Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	◆ Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	◆ Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		Νo
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		No
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 U S? If "Yes," complete Schedule F, Part II	15		No
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 U S ? If "Yes," complete Schedule F, Part III	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Νο
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νο
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νo

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		No
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 line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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		
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If</i> "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? 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		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
	<i>IV</i>	28a		Νo
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		Νo
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νο
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο
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		Νο
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		No
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	Yes	
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		No
36	<b>Section 501(c)(3) organizations.</b> 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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	Yes	

orm	990 (2009)				Page <b>5</b>
Par	rt V Statements Regarding Other IRS Filings and Tax Compliance				
		_		Yes	No
	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable				
	1a	10			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b	0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	table	1c	Yes	
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	21			
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns <b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	3?	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered learning to the covered le	oy this	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b	Yes	
	At any time during the calendar year, did the organization have an interest in, or a signature or other au over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		No
	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 Ba Financial Accounts	nk and			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? .		5a		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transact	ion?	5b		Νo
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regar	dıng	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		6a	Yes	
b	If "Yes," did the organization include with every solicitation an express statement that such contribution were not tax deductible?		6b	Yes	
7	Organizations that may receive deductible contributions under section 170(c).				
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for go services provided to the payor?	ods and	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	[	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was rafile Form 8282?	equired to	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year				
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a per benefit contract?		7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contrac		7f		
		-	7g		
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C a required?	15	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organization the supporting organization, or a donor advised fund maintained by a sponsoring organization, have exceed business holdings at any time during the year?	ess	8		
9	Sponsoring organizations maintaining donor advised funds.				
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		
10	Section 501(c)(7) organizations. Enter				
а	Initiation fees and capital contributions included on Part VIII, line 12 10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club				

11a

11b

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

**b** Gross income from other sources (Do not net amounts due or paid to other sources

against amounts due or received from them ) . . . . . . . . . . . .

Section 501(c)(12) organizations. Enter

a Gross income from members or shareholders . .

12a

5730 West 74th Street Indianapolis, IN 46278 (317) 347-3620

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

<u> </u>	ection A. Governing Body and Management			
30	Ction A. Governing body and Management		Yes	No
			103	140
1a	Enter the number of voting members of the governing body 1a 24	<u> </u>		
ь	Enter the number of voting members that are independent 1b 24	,		
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	Yes	
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		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		No
6	Does the organization have members or stockholders?	6	Yes	- 110
о 7а	Does the organization have members, stockholders, or other persons who may elect one or more members of the		163	
	governing body?	7a	Yes	
Ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal			
Re	venue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		Νo
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?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form			
		11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
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	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
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?			
2	The organization's CEO, Executive Director, or top management official	15a		No.
	Other officers or key employees of the organization	15b		No
	If "Yes" to line a or b, describe the process in Schedule O (See instructions )	135		110
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		Νο
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		
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed <b>►</b> IN			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply			
19	Own website Another's website Vupon request  Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who pe	he orga	anızatıor	n <b>▶</b>
	Tony Walker			

## Part VIII 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 Report compensation for the calendar year ending with or within the organization's tax year. 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 all of the organization's current key employees. See instructions for definition of "key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if the organization did i	not compen	ffice	r, dırector, trustee	or key employee						
<b>(A)</b> Name and Title	(B) (C) A verage Position (check all that apply)				( <b>D)</b> Reportable compensation	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other			
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data										

1b	Total	0		21,610
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ▶2			
_			Yes	No
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> " <i>Yes,"</i> complete Schedule <i>J</i> for such individual	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such			
	ındıvıdual	4		N o
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No
s	ection B. Independent Contractors			
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization			
	(A) Name and business address  (B) Description of services		(C Compen	
2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization \( \blacktrianglerightarrow 0.000 \)			
		F	orm <b>990</b>	(2009)

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Form 990 (2009)

Form 99								Page <b>9</b>
Part V	<u> </u>	Statement o	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts ots	1a	Federated camp	paigns 1a					
gra	ь		es <b>1b</b>	89,085				
ffs,	С		ents 1c					
<u>2</u>	d e	Government grants	rations 1d s (contributions) 1e					
ons sin	f	_	ons, gifts, grants, and <b>1f</b>					
bati Ber	g .	sımılar amounts no						
Contributions, gifts, grants and other similar amounts	9	lines 1a-1f \$ _						
လူ မွ	h	Total. Add lines	s 1a-1f	🟲	89,085			
e				Business Code				
Program Serwce Revenue	2a b	Assessment revenu	ie	900,099	13,794,472	13,794,472		
か 張	C							
2. Y	d		•					
ä E	e							
Ž Ž	f	All other progra	am service revenue					
ž	g	Total. Add lines	s 2a-2f		13,794,472			
	3	Investment inc	ome (including dividen	. F				
			ar amounts) stment of tax-exempt bond	<b>⊢</b>	70,259			70,259
	4 5			· · · · · · · · · · · · · · · ·	72,605			72,605
		•	(ı) Real	(II) Personal				
	6a	Gross Rents						
	b	Less rental expenses						
	С	Rental income or (loss)						
	d	Net rental incor	me or (loss)					
	7a b	Gross amount from sales of assets other than inventory Less cost or	(i) Securities	(II) O ther				
		other basis and sales expenses						
	С	Gain or (loss)						
	d 8a	Net gain or (los Gross income f	s)	▶				
Other Revenue	ь	events (not incl \$ of contributions See Part IV, lin	luding  s reported on line 1c)					
Ō	С		loss) from fundraising	events 🕨				
	9a	Gross income fi See Part IV, lin	rom gaming activities le 19 a					
	ь		penses <b>b</b>					
	10a	Gross sales of returns and allo		vitiesF				
	.		a .	187,302				
	р С		oods sold <b>b</b> (loss) from sales of inve	83,193	104,109	99,819	4,290	
		Miscellaneous	· · ·	Business Code	· · · · · · · · · · · · · · · · · · ·	· ·	· · · · · · · · · · · · · · · · · · ·	
	11a	reimbursed exp	enses fr	900,099	762,949		762,949	
	ь							
	c	A.II						
	d e	All other revenu						
		iotai. Add IIIles	,		762,949			
	12	Total revenue.	See Instructions .	▶[	14,893,479	13,894,291	767,239	142,864

## 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).							
			s (B), (C), and (B)	(D).	(D)			
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses		Fundraising expenses			
1	Grants and other assistance to governments and organizations in the U S $$ See Part IV $$ line 21 $$	1,024,403						
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	304,201						
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	1,250,256						
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	127,512						
c	Accounting	145,650						
d	Lobbying							
е	Professional fundraising See Part IV, line 17							
f	Investment management fees							
g	Other	191,599						
12	Advertising and promotion	71,793						
13	Office expenses	146,078						
14	Information technology	23,030						
15	Royalties							
16	Occupancy	178,313						
17	Travel	242,098						
18	Payments of travel or entertainment expenses for any federal, state, or local public officials							
19	Conferences, conventions, and meetings	274,940						
20	Interest	3,677						
21	Payments to affiliates	7,365,182						
22	Depreciation, depletion, and amortization	194,963						
23	Insurance	19,965						
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	Unrelated business inco	5,936						
ь	Donations and sponsorsh	611,739						
c	A gency services	514,822						
d	Dues and Subscriptions	71,961						
e	Equipment rental and ma	28,389						
f	All other expenses	-55,054						
25	Total functional expenses. Add lines 1 through 24f	12,741,453						
26	Joint costs. Check here ► ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation							

Pa	rt X	Balance Sheet						
					(A)		(B)	
					Beginning of year	4	End of year	
	1	Cash—non-interest-bearing			0.40.4.000	1	0.004.007	
	2	Savings and temporary cash investments	•		6,124,933	-	8,001,667	
	3	Pledges and grants receivable, net	•		.=	3		
	4	Accounts receivable, net			176,951	4	369,366	
	5	Receivables from current and former officers, directors, trustees highest compensated employees Complete Part II of	, key e	employees, and				
		Schedule L		5				
	6	Receivables from other disqualified persons (as defined under sepersons described in section $4958(c)(3)(B)$ Complete Part II o	4958(f)(1)) and					
		Schedule L				6		
ë	7	Notes and loans receivable, net				7		
ssets	8	Inventories for sale or use				8		
⋖	9	Prepaid expenses and deferred charges			47,783	9	91,647	
	10a	Land, buildings, and equipment cost or other basis <i>Complete</i> Part VI of Schedule D	10a	1,098,576				
	ь	Less accumulated depreciation	10b	507,301	748,323	10c	591,275	
	11	Investments—publicly traded securities				11		
	12	Investments—other securities See Part IV, line 11			25,664	12	17,714	
	13	Investments—program-related See Part IV, line 11			13			
	14	Intangible assets		14				
	15	Other assets See Part IV, line 11	132,847	15	116,947			
	16	Total assets. Add lines 1 through 15 (must equal line 34)			7,256,501	16	9,188,616	
	17	Accounts payable and accrued expenses .			643,008	17	450,062	
	18	Grants payable	459,995	18	476,399			
	19	Deferred revenue						
	20	Tax-exempt bond liabilities				20		
es G	21	Escrow or custodial account liability Complete Part IV of Schedule	eD.			21		
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified	ayables to current and former officers, directors, trustees, key					
<u>-</u>		persons Complete Part II of Schedule L				22		
	23	Secured mortgages and notes payable to unrelated third parties				23		
	24	Unsecured notes and loans payable to unrelated third parties				24		
	25	Other liabilities Complete Part X of Schedule D				25		
	26	Total liabilities. Add lines 17 through 25			1,138,422	26	926,461	
<u></u>		Organizations that follow SFAS 117, check here 🕨 🔽 and comp	lete lii	nes 27				
Ð		through 29, and lines 33 and 34.						
an an	27	Unrestricted net assets			6,115,579	27	8,262,155	
Fund Balance	28	Temporarily restricted net assets			2,500	28	0	
Ξ	29	Permanently restricted net assets				29		
∄		Organizations that do not follow SFAS 117, check here 🕨 🦵 an	d com	plet e				
ö		lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30		
Assets	31	Paid-in or capital surplus, or land, building or equipment fund.				31		
	32	Retained earnings, endowment, accumulated income, or other fu	nds			32		
Ř	33	Total net assets or fund balances			6,118,079	33	8,262,155	
_	34	Total liabilities and net assets/fund balances			7,256,501	34	9,188,616	

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	☐ Separate basis ☐ Both consolidated and separated basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		Νο
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Form **990** (2009)

DLN: 93493042004111

OMB No 1545-0047

## **SCHEDULE C** (Form 990 or 990-EZ)

## **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

Open to Public Inspection

Department of the Treasury ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. Internal Revenue Service

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities),

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

Se Se f th	e organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 ction 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II ction 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line ction 501(c)(4), (5), or (6) organizations Complete Part III	·A Dor Part II-E	not co B Do	omplet not co	e Part II-B mplete Part	: II-A
		mploye	rıde	ntıfıca	tion numbe	er
Ind	ana Soybean Alliance Inc					
Dar	t I-A Complete if the organization is exempt under section 501(c) or is a so	5-202			anizatio	n
			32.	/ org	aiiizatio	
1	Provide a description of the organization's direct and indirect political campaign activities in Part	IV				
2	Political expenditures	Þ	-	\$		
3	Volunteer hours					
Par	t I-B Complete if the organization is exempt under section 501(c)(3).					
1	Enter the amount of any excise tax incurred by the organization under section 4955		<b> </b>	\$		
2	Enter the amount of any excise tax incurred by organization managers under section 4955		<b>&gt;</b>	* — \$		
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?			· —	┌ Yes	┌ No
4a	Was a correction made?				┌ Yes	┌ No
ь	If "Yes," describe in Part IV					
Par	t I-C Complete if the organization is exempt under section 501(c) except s	ection	า 50	<b>1(c)</b>	(3).	
1	Enter the amount directly expended by the filing organization for section 527 exempt function act	ivities	۲	\$		
2	Enter the amount of the filing organization's funds contributed to other organizations for section 5	27				
	exempt funtion activities		<b>-</b>	\$		
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 1	7 b	F	\$		
4	Did the filing organization file Form 1120-POL for this year?			* <u> </u>	┌ Yes	┌ No
5	State the names, addresses and employer identification number (EIN) of all section 527 political	-				

were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV

(a) Name	( <b>b)</b> Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

e Grassroots ceiling amount (150% of line 2d, column (e))

**f** Grassroots lobbying expenditures

Pa	rt II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c	)(3) and file	d Form 5768	(election
	Check   If the filing organization belongs to a Check   If the filing organization checked box		d" provisions apply	,		
<u> </u>	Limits on Lobbying E  (The term "expenditures" means ar	Expenditures			(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	ıbyıng)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	yıng)			
c	Total lobbying expenditures (add lines 1a and 18	b)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount f	from the following table	ın both			
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxa 20% of the amount on lir				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	0		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,0	000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,00	00		
	Over \$17,000,000	\$1,000,000				
		•				
g	Grassroots nontaxable amount (enter 25% of lin	ne 1 f)				
h	Subtract line 1g from line 1a If zero or less, enter	er -0-				
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -				
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file F	orm 4720 repoi	rtıng	┌ Yes ┌ No
	(Some organizations that made a columns below. See the	he instructions fo	ection do not l r lines 2a thro	nave to com ugh 2f on pa		ne five
	Lobbying Exp	enditures During	4-Year Averag	ing Period	I	ı
	Calendar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	<b>(c)</b> 2008	( <b>d)</b> 2009	<b>(e)</b> Total
2a	Lobbying non-taxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots non-taxable amount					

Sche	edule C (Form 990 or 990-EZ) 2009				age <b>3</b>
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and hat (election under section 501(h)).	s NOT f	iled Fo	rm 5768 (b)	B 
		(	(a)		
		Yes	No	A mour	nt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
С	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities? If "Yes," describe in Part IV				
j	Total lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c	:)(5), o	r sectio	n
_			_	Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		<u> </u>	1 Yes	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	No
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3	Νo
Par	rt III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Paanswered "Yes".				n
1	Dues, assessments and similar amounts from members	1			
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				
а	Current year	2a			
b	Carryover from last year	2b			
С	Total	2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	5			
Pa	art IV Supplemental Information				
	omplete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5 so, complete this part for any additional information	, and Part	II-B, line	11	
		anation			

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As Filed Data

DLN: 93493042004111

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

**Supplemental Financial Statements** 

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

Internal Revenue Service ► Attach to Form 990. ► See separate instructions. **Employer identification number** Name of the organization Indiana Sovbean Alliance Inc. 35-2026389 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised □ No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the taxable year 🛌 Number of states where property subject to conservation easement is located 🛌 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year 🕨 A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 🕨 🛊 🔛 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part 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. If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, 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 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

ar	<b>411</b> Organizations Maintaining Co	llections of Art	t, His	tori	<u>cal Tr</u>	easur	res, or O	the	r Similar <i>i</i>	Asse	ts (co	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	ie foll	lowing t	hat are	a significa	ant u	se of its coll	ection	า	
а	Public exhibition		d	Γ	Loan	orexch	ange progr	ams				
b	Scholarly research		e	Γ	Other							
c	Preservation for future generations											
	Provide a description of the organization's co	ollections and expla	ıın hov	v the	y furthe	r the or	ganızatıon	ı's ex	empt purpos	e ın		
5	During the year, did the organization solicity assets to be sold to raise funds rather than t			,					ular	Г	Yes	┌ No
ar	t IV Escrow and Custodial Arrang						answere	d "Y	es" to Form	990	),	
	Part IV, line 9, or reported an ar											
.a	Is the organization an agent, trustee, custoo included on Form 990, Part X?					tions oi	r other ass	ets r	not	Γ	Yes	☐ No
Ь	If "Yes," explain the arrangement in Part XI	V and complete the	follow	ing t	able		_					
								_		A mou	ınt	
с -	Beginning balance						-	1c				
d	Additions during the year							1d				
е	Distributions during the year							1e				
f	Ending balance						L	<b>1</b> f				
3	Did the organization include an amount on Fe	orm 990, Part X, lın	e 21?							Γ	Yes	┌ No
	If "Yes," explain the arrangement in Part XIV											
a	rt V Endowment Funds. Complete											
	D	(a)Current Year	(b)	Prior `	Year	(c)Two	Years Back	(d)	Three Years Bad	k (e	)Four Ye	ears Back
1	Beginning of year balance									-		
)	Contributions									-		
:	Investment earnings or losses									-		
d	Grants or scholarships									-		
е	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance											
	Provide the estimated percentage of the yea	r end balance held	as					<u> </u>				
3	Board designated or quasi-endowment	%										
b	Permanent endowment > %											
		•										
C a	Term endowment  %  Are there endowment funds not in the posse	ssion of the organiz	ation 1	that a	are held	and ac	lministere	d for	the			
-	organization by	ooton or the organiz				44					Yes	No
	(i) unrelated organizations								3	a(i)		
	(ii) related organizations								3	a(ii)		
b	If "Yes" to 3a(II), are the related organizatio							•		3b		
	Describe in Part XIV the intended uses of th					00 D	1.37 1					
3 [	t VI Investments—Land, Building	s, and Equipme	nt. S							. 1		
	Description of investment				i) Cost oi sis (inves		( <b>b)</b> Cost or obasis (oth		(c) Accumula depreciatio		( <b>d</b> ) Bo	ook value
	Land											
b	Buildings		•									
С	Leasehold improvements						486	5,456	13	6,776		349,68
d	Equipment						612	2,120	37	0,525		241,595
e	Other								_			

591,275

Part VII Investments—Other Securities. Sec	e Form 990, Part X, line 17	
<ul><li>(a) Description of security or category (including name of security)</li></ul>	(b)Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	<b>*</b>	
Part VIII Investments—Program Related. Se	ee Form 990, Part X, line	13.
(a) Description of investment type	(b) Book value	(c) Method of valuation
——————————————————————————————————————	(b) Book value	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13 )	▶ Inc. 1E	
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, (a) Descri	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,  (a) Description (b) Should equal Form 990, Part X, col.(B) line	ine 15.	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part	Ine 15.  Iption  15.)  X, line 25.	
Part IX Other Assets. See Form 990, Part X,  (a) Description (b) Should equal Form 990, Part X, col.(B) line	ine 15.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part	Ine 15.  Iption  15.)  X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part  (a) Description of Liability	Ine 15.  Iption  15.)  X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part  (a) Description of Liability	Ine 15.  Iption  15.)  X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part  (a) Description of Liability	Ine 15.  Iption  15.)  X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part  (a) Description of Liability	Ine 15.  Iption  15.)  X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part  (a) Description of Liability	Ine 15.  Iption  15.)  X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part  (a) Description of Liability	Ine 15.  Iption  15.)  X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part  (a) Description of Liability	Ine 15.  Iption  15.)  X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part  (a) Description of Liability	Ine 15.  Iption  15.)  X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part  (a) Description of Liability	Ine 15.  Iption  15.)  X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part  (a) Description of Liability	Ine 15.  Iption  15.)  X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part  (a) Description of Liability	Ine 15.  Iption  15.)  X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part  (a) Description of Liability	Ine 15.  Iption  15.)  X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part  (a) Description of Liability	Ine 15.  Iption  15.)  X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part  (a) Description of Liability	Ine 15.  Iption  15.)  X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part  (a) Description of Liability	Ine 15.  Iption  15.)  X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part  (a) Description of Liability	15.)  X, line 25.  (b) A mount	

Schedule D (Form 990) 2009

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	14,893,479
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	12,741,453
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	2,152,026
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	-7,950
9	Total adjustments (net) Add lines 4 - 8	9	-7,950
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	2,144,076
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	6,840,591
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	75,243
3	Subtract line <b>2e</b> from line <b>1</b>	3	6,765,348
4	A mounts 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)		
С	Add lines <b>4a</b> and <b>4b</b>	4c	8,128,131
5	Total Revenue Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 12)	5	14,893,479
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial statements	1	4,696,515
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV) 2d 83,193		
e	Add lines <b>2a</b> through <b>2d</b>	2e	83,193
3	Subtract line <b>2e</b> from line <b>1</b>	3	4,613,322
4	A mounts 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)		
c	Add lines <b>4a</b> and <b>4b</b>	4c	8,128,131
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 18)	5	12,741,453
Par	t XIV Supplemental Information		

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 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 4b Also complete this part to provide any additional information

Ident if ier	Return Reference	Explanation
Part XI, Line 8 - Other Adjustments		Subsidiary income -7950
Part XII, Line 2d - Other Adjustments		Subsidiary income reported on subsidiary return -7950 Cost of sales netted against revenue for tax return 83193
Part XII, Line 4b - Other Adjustments		Payments to affiliates netted against income in financial statements 7365182 Reimbursed expenses netted against expense in financials 762949
Part XIII, Line 2d - Other Adjustments		Cost of sales netted against revenue for tax return 83193
rt XII, Line 4b - Other  justments  rt XIII, Line 2d - Other		Payments to affiliates netted against income in financial statements 7365182 Reimbursed expenses netted against expense in financials 762949
		Schedule D, Part X, Line 2 ISA and the Foundation are organizations exempt from federal income tax under Section 501 (c)(6) and Section 501(c)(3), respectively, of the Internal Revenue Code and have both been classified as organizations that are not private foundations under Section 509(a) of the Internal Revenue Code ISP is recognized as a C corporation by the IRS Accounting Standards for Income Taxes provide detailed guidance for financial statement recognition, measurement, and disclosure of uncertain tax positions recognized in an enterprise's financial statements ISA, the Foundation, and ISP adopted the provisions of this standard November 1, 2009 The implementation of this standard did not have any impact on the financial position or net assets of ISA, the Foundation, or ISP ISA and the Foundation individually evaluate their activities to determine that they are in compliance with their tax-exempt purpose ISA and the Foundation's management does not believe it is engaged in any activities that would create uncertain tax positions

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Part I General Information on Grants and Assistance

**Schedule I** (Form 990)

**Grants and Other Assistance to Organizations, Governments and Individuals in the United States**  OMB No 1545-0047

DLN: 93493042004111

Department of the Treasury Internal Revenue Service Name of the organization

Indiana Soybean Alliance Inc

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. ► Attach to Form 990

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and

Employer identification number

3	5 -	20	2 (	6	3	8	9
---	-----	----	-----	---	---	---	---

Form 990, Part IV	/, line 21 for any	o Governments and recipient that received 00) if additional space	d more than \$5,000.	Check this box if r	no one recipient rece	ived more than \$5,0	000. Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Purdue UNIVERSITY23510 Network Place Chicago, IL 606731235	356002041		484,878				ISA funds a variety o grants with Purdue University pertaining to soybean production livestock, biodiesel, new uses and aquaculture
North Central Soybean Research1255 SW Prairie Trail Parkway Ankeny,IA 50023	421394799		200,000				NCSRP invests checkoff funds in research programs to better understand and manage plant stressors that reduce soybean yields and farmer profitability
National Biodiesel BoardPO Box 104898 Jefferson City, MO 65110	431623643		17,000				Investigation of the effect of high-blend levels of biodiesel in underground mining operations
American Soybean Association12125 Voodcrest Executive Drive St Louis, MO 631415009	420688064		100,000				Fiscal year 2010 wish funding
US Poultry & Egg Association1530 Cooledge Road Fucker, GA 30084	581636513		40,000				Marketing for shelf stable eggs
owa Soybean Association 1255 SW Prairie Trail Parkway Ankeny,IA 50023	426127197		75,000				Multi-state project entitled STAARS
nforma Economics IncPO Box 33282 Hartford, CT 061503282	621011283		94,750				Evaluating the feasibility of increasing dairy cattle herds in Indiana and evaluating the effects of truck weight to infrastructure and transportation relative to agriculture in Indiana
United Soybean Board16305 Swingley Ridge Road Suite 150 150 Chesterfield, MO 63017	431592277		26,000				A nimal utilization - acquaculture soy in acquaculture research
AG Technology and Environmental Stewardship Foundation1255 SW Prairie Trail Parkway Ankeny,IA 50023	421510504		25,000				Indiana on farm network - nutrient management program
US Soybean Export Council .6305 Swingley Ridge Road Suite 200 200 :hesterfield, MO 63017	202462213		-38,225				reimbursement of funds not used during 2007 & 2008

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

(a)Type of grant or assistance	( <b>b)</b> Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV	Supplemental Infor	mation. Complet	e this part to provid	e the information r	equired in Part I, line	2. and any other additiona	Linformation.

Ident if ier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 A final report is required to ensure outcome of research is documented and that Indiana Soybean Alliance is satisfied with work One grant is selected each year to review expenses to verify alignment with grant stipulations

## **SCHEDULE 0**

Department of the Treasury

(Form 990)

Internal Revenue Service

## **Supplemental Information to Form 990**

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009

Open to Public

Name of the organization Indiana Soybean Alliance Inc Employer identification number

35-2026389

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 2		Dale and Lisa Koester, non-voting board members, are married
Form 990, Part VI, Section A, Iine 6		A potential member completes an application for membership and pays the associated fee Membership in the Indiana Soybean Alliance (ISA) helps to support our work in the policy arena. On a national level, a member of ISA becomes a member of the American Soybean Association, an organization that represents soybean farmers in Washington, D.C. ASA puts out a weekly email new sletter that keeps members informed of what is going on nationally. ASA also has many partnerships with companies that offer discounts to members. ASA is celebrating their 90th year in 2010 of representing soybean farmers. On a state level, membership supports the policy activity in Indianapolis and on the local level. ISA policy is driven by the strategic plan, but also comes from the farmer level up to the M&P committee. All 3 year members are able to obtain a \$100 discount from 6 participating companies.
Form 990, Part VI, Section A, line 7a		Members elect directors to represent each district
Form 990, Part VI, Section B, line 11		The 990 will be prepared annually by external audit firm relying on management data to complete the filing. The return will be reviewed by the Senior Director of Finance, interim Executive Director, and Budget and Finance Committee. After approval from these sources, the full 990 will be presented to the Board for approval prior to filing.
Form 990, Part VI, Section B, line 12c		Each officer, director, and key employee must annually review and complete a form disclosing any conflicts
Form 990, Part VI, Section C, line 19		Financial statements and annual reports are available upon request. The annual report appears annually in ISA's magazine
Form 990, part XI, Line 1		The financial statements are prepared under the modified cash basis of accounting
Form 990, part XI, Line 2c		The audit review process has not changed from the prior year

ldentifier	Return Reference	Explanation
Form 990, part III, Line 4a	Program Service Accomplishments	New Uses Initiative conducts projects in partnership with scientists and industries to commercialize emerging technologies and develop alternative markets and uses for Indiana soybeans. In fiscal year 2010, this initiative targeted these activities. New Uses Program Implementation, Permaflo, Concrete Sealer, Soy Wax, INVEST Student Contest, Student Innovation Competition, and Nu Soy Gel. Livestock Initiative conducts projects to grow the Indiana livestock Industry, a consumer of soybean meal. In fiscal year 2010 this initiative focused on these activities. Livestock Initiative Implementation, Education, Environment, and Business Expansion. Research Initiative conducts projects to support the development of new products or technologies through genetic and utilization research that enhance soybeans. In fiscal year 2010, this initiative focused its funding in these areas. Research Initiative Implementation, Production Research Grants, Endow ed Chairs Research. Grants and North Central Soybean Research Program (NCSRP) funding. Aquaculture Initiative conducts projects to develop and grow the Indiana aquaculture industry. A direct result of this development and grow the will be increased consumption of soybean meal in fish diets. In fiscal year 2010, this initiative focused on the following areas. Aquaculture Initiative Implementation, Education Outreach, Industry Relations, Producer Development, Market Analysis and Aquaculture Research Grants. Grain Marketing Initiative conducts projects to strengthen soybean demand through innovative grain marketing efforts which include identity preserved production, grain quality improvement, and international marketing efforts which include identity preserved production, grain quality improvement, and international marketing efforts in fiscal year 2010, this initiative focused on the following areas. Grain Marketing Initiative Implementation, Industry Relations, Production, International Marketing, and Transportation Infrastructure. Biodiesel Producer Support, Consumer Education

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DLN: 93493042004111

SCHEDULE R (Form 990)

Name of the organization

Indiana Soybean Alliance Inc

## **Related Organizations and Unrelated Partnerships**

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

2009

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Employer identification number

35-2026389

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a)
Name, address, and EIN of disregarded entity

**(b)** Primary activity (c)
Legal domicile (state
or foreign country)

(d) Total income (e) End-of-year assets **(f)** Direct controlling entity

Part II

**Identification of Related Tax-Exempt Organizations** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a)
Name, address, and EIN of related organization

(b) Primary activity

(c)
Legal domicile (state or foreign country)

(d) Exempt Code section

Public charity status (if section 501(c)(3)) (f)
Direct controlling
entity

Indiana Soybean Board Foundation

5730 W 74th Street

Indianapolis, IN 46278 35-2149992 SUPPORT INDIANA SOYBEAN ALLIANCE, INC

IN

501(C)(3)

509(A)(3), TYPE II

(c)

Legal

(j)

General or

Yes

No

(h)

Yes

Disproprtionate

No

(i)

Code V—UBI

Part III	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part	۷, line 3
	because it had one or more related organizations treated as a partnership during the tax year.)	

(e)

(d) Direct controlling **(f)** Share of total income (b) (a) (g) Predominant income Primary activity allocations? amount in box 20 of managing Name, address, and EIN of domicile Share of end-of-year (related, unrelated, related organization (state or entity assets Schedule K-1 partner? excluded from tax (Form 1065) foreign under sections 512country) 514)

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete of the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	<b>(d)</b> Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	( <b>h)</b> Percentage ownership
INDIANA SOY PRODUCTS Inc 5730 W 74th Street Indianapolis, IN46278 35-2097421	MERCHANDISE SALES	IN		С	-7,950	17,714	100 000 %

(4)

(5)

(6)

CHE	udle K (Form 990) 2009		Pa	ge .
Pa	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)			
	Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	N
<b>1</b> D	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		N
b	Gift, grant, or capital contribution to other organization(s)	1b		Ž
c	Gift, grant, or capital contribution from other organization(s)	1c		Ž
d	Loans or loan guarantees to or for other organization(s)	1d		Ż
e	Loans or loan guarantees by other organization(s)	1e		N
f	Sale of assets to other organization(s)	<b>1</b> f		N
g	Purchase of assets from other organization(s)	1g		Ż
h	Exchange of assets	1h		Z
i	Lease of facilities, equipment, or other assets to other organization(s)	1i		N
j	Lease of facilities, equipment, or other assets from other organization(s)	1j		N
k	Performance of services or membership or fundraising solicitations for other organization(s)	1k		N
ı	Performance of services or membership or fundraising solicitations by other organization(s)	11		Ž
m	Sharing of facilities, equipment, mailing lists, or other assets	1m		N
n	Sharing of paid employees	1n		N
0	Reimbursement paid to other organization for expenses	10		N
p	Reimbursement paid by other organization for expenses	<b>1</b> p		N
q	Other transfer of cash or property to other organization(s)	1q		N
r	O ther transfer of cash or property from other organization(s)	1r		N
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds			
	(a) Name of other organization  (b)  Transaction  type(a-r)		(c) t involve	ed
1) 2)				
• •				
3)				

## Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a)
Name, address, and EIN of entity

(b) Primary activity (c) Legal domicile (state or foreign country) (d)
Are all
partners
section
501(c)(3)
organizations?

Yes No

(e) Share of end-of-year assets **(f)** Disproprtionate allocations?

No

Yes

(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) (h) General or managing partner?

Yes No

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**Depreciation and Amortization** 

(Including Information on Listed Property)

DLN: 93493042004111

OMB No 1545-0172

Department of the Treasury See separate instructions. ► Attach to your tax return. Sequence No 67 Internal Revenue Service Identifying number Name(s) shown on return Business or activity to which this form relates Indiana Sovbean Alliance Inc Form 990 Page 10 35-2026389 **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 1 Maximum amount. See the instructions for a higher limit for certain businesses. 1 250.000 2 Total cost of section 179 property placed in service (see instructions) 2 3 800.000 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-4 5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions (b) Cost (business use (a) Description of property 6 (c) Elected cost only) 6 7 Listed property Enter the amount from line 29 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562 10 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property ) (See instructions ) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 15 **15** Property subject to section 168(f)(1) election 16 Other depreciation (including ACRS) 16 194,963 MACRS Depreciation (Do not include listed property.) (See instructions.) **Section A** 17 17 MACRS deductions for assets placed in service in tax years beginning before 2009 18 If you are electing to group any assets placed in service during the tax year into one or more Section B—Assets Placed in Service During 2008 Tax Year Using the General Depreciation System (c) Basis for (b) Month and depreciation (a) Classification of (d) Recovery (a)Depreciation year placed in (e) Convention (f) Method (business/investment property period deduction service use only—see instructions) 19a 3-year property **b** 5-year property c7-year property d 10-year property e 15-year property f 20-year property g 25-year property 25 yrs S/L h Residential rental 27 5 yrs ΜМ S/L property 27 5 yrs ММ S/L MMS/L i Nonresidential real property MMS/L Section C—Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System 20a Class life S/L **b** 12-year 12 yrs S/L c 40-vear 40 vrs ММ S/L Non-Res Prop Type 1 count 0 Non-Res Prop Type 2 count 0 Non-Res Prop Totals count 0 **Summary** (see instructions) 21 Listed proper 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here 22 194.963 and on the appropriate lines of your return Partnerships and S corporations—see instructions 23 For assets shown above and placed in service during the current year, enter the 23 portion of the basis attributable to section 263A costs

Part V
Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense,

compl	ete <b>only</b>	24a, 24b, colui	mns (a	) thro	ugh (c)	of Sec	ction	A, al	ll of .	Sectioi	n B, a	nd Se	ction (	C if ap	oplicat	ole.
Section A—Deprec																
<b>24a</b> Do you have evidenc	e to support	the business/investi	ment use	claime	d? ┌ Yes	. ⊢ <sub>No</sub>			<b>24b</b> If	"Yes," ı	s the ev	/ idence	written?		sГNo	)
										1						
(a) Type of property (list Distorbicles first)	( <b>b)</b> Pate placed II service	(c) Business/ In investment use percentage	(d) Cost or ot basıs	ther	(busines	(e) deprecia s/investr e only)	- 11	(f) Recove period		<b>(g)</b> Method/ conventio		<b>(h</b> Deprec deduc	ation/		(i) Elected section 1 cost	
25Special depreciation allow 50% in a qualified busine			olaced in s	service (	during the	tax year	and u	sed mo	re tha	in 25						
<b>26</b> Property used more	•	•	ıness u:	s e							- 1					
		%														
		%									_					
	orless in a		ssuse													
		%							S/L	-						
		%							S/L					]		
20 0 dd		%	7 5-4			21		4	S/L		_			+-		
28 Add amounts in col		_				ne 21,	page .	1 .	•		8		20	+		
29 Add amounts in col	umn (I), IIr				mation	·	· ·	• Va	· biol	•			29			
Complete this section f	or vehicle:										r relat	ed per	son			
f you provided vehicles to y	our employe	es, first answer the q	uestions	ın Sectio	on C to see	ıf you n	neet ar	exce	otion t	o comple	ting this	section	for thos			
<b>30</b> Total business/inve		-	the _	-	a) icle 1	V e hı	•	V	(c) ehic		V e h i	d) cle 4	<b>V</b> ehı	-	V e hı	f) cle 6
<b>31</b> Total commuting m	ıles drıven	during the year	.  -													
32 Total other persona	ıl(noncomr	muting) miles driv	en													
33 Total miles driven o	during the	year Add lines 3	。													
through 32			·  _													
<b>34</b> Was the vehicle ava	aılable for	personal use		Yes	No	Yes	No	Ye	es	No	Yes	No	Yes	No	Yes	No
during off-duty houi	rs? .													<u> </u>		<u> </u>
<b>35</b> Was the vehicle use owner or related pe	rson?	· · · · ·	5%													
<b>36</b> Is another vehicle a	avaılable f	or personal use?														
<b>Section</b> Answer these questions 5% owners or related p	s to detern										-				not moi	re tha
<b>37</b> Do you maintain a vemployees?		•	t prohib	ıts all	personal •	use of	vehic	les,ı	nclud	ling cor	nmutir	ig, by y	our •	Y	es	No
<b>38</b> Do you maintain a vemployees? See the																
<b>39</b> Do you treat all use	ofvehicle	s by employees a	as perso	nal us	e? .											
40 Do you provide mor vehicles, and retain	e than five	vehicles to your	•			rmatio	n fron	n your	r emp	loyees	about	the us	e of the	e 🗀		
<b>41</b> Do you meet the red			· Ified aut	 tomobı	le demor	- nstratio	n use	? (Se	e ins	tructio	ns)		· 		-+	
Note: If your answe	r to 37, 38	3, 39, 40, or 41 is	s "Yes,"	do no	t comple	te Sect	ion B	for th	ne co	vered v	ehicle:	S				
Part VI Amortiz		<u> </u>													I	
		(b)		(0	-)			(d)		(e	:)			(f)		
(a)		Date		A mort	-			ode		A morti			A mo	rtızatı	on for	
Description of co	STS	amortization begins		amo	unt		se	ction		perio percei			t	hıs yea	ar	
<b>42</b> A mortization of cos	ts that be		2009 ta:	x year	(see ins	truction	ns)				<u> </u>					
<b>43</b> A mortization of cos	ts that be	gan before your 2	009 tax	year						•	43					

44 Total. Add amounts in column (f) See the instructions for where to report . . .

44

# Software ID: Software Version:

**EIN:** 35-2026389

Name: Indiana Soybean Alliance Inc

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors										
<b>(A)</b> Name and Title	(B) Average hours	(C) Position (check all that apply)						( <b>D)</b> Reportable compensation	(E) Reportable compensation	<b>(F)</b> Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
Lında Bacon dırector	5 00	X						0	0	0
Mike Beard	5 00	X						0	0	0
Director	3 00	^						v	· ·	Ü
Fayte Brewer director	5 00	X						0	0	0
Brad Burbrink director	5 00	X						0	0	0
Jim Cherry director	5 00	X						0	0	0
Trevor Glick director	5 00	X						0	0	0
A lan Kemper dırector	5 00	X						0	0	0
Joe Meyer ex officio	5 00	X						0	0	0
Doug Morrow director	5 00	X						0	0	0
Jerry Osterholt director	5 00	Х						0	0	0
Mark Seib director	5 00	X						0	0	0
Lynn Teel president	5 00	X		X				0	0	0
Mike Yoder director	5 00	X						0	0	0
Scott Fritz ex officio	5 00	X						0	0	0
John Baugh ex officio	5 00	X						0	0	0
Karen Fear ex officio	5 00	X						0	0	0
Marshall Martin ex officio	5 00	Χ						0	0	0
Mıke Shuter ex officio	5 00	X						0	0	0
jeff gormong ex officio	5 00	X						0	0	0
tom griffiths director	5 00	X						0	0	0
carl kıssell dırector	5 00	X						0	0	0
dale koester ex officio	5 00	X						0	0	0
lısa koester ex officio	5 00	X						0	0	0
gary lamie ex officio	5 00	X						0	0	0
davıd lowe dırector	5 00	Х						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors											
<b>(A)</b> Name and Title	(B) Average hours		(C tion ( hat a	che	)	_		( <b>D</b> ) Reportable compensation	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation	
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations	
shelley mcdaniel director	5 00	X						0	0	0	
mark r nigh director	5 00	X						0	0	0	
adam renbarger dırector	5 00	X						0	0	0	
joseph steinkamp director	5 00	X						0	0	0	
donald wyss director	5 00	X						0	0	0	
darrel I mcgriff director	5 00	X						0	0	0	
Jim Schriver ex officio	5 00	X						0	0	0	
Kevin Wilson vice president	5 00	X		Х				0	0	0	
Jonathan Whiteman former CFO	40 00			Х				88,016	0	7,534	
mıchael morehouse treasurer	5 00	X		Х				0	0	0	
mark henderson executive director	40 00			Х				125,236	0	4,865	
Tony Walker Senior Director of Finan	40 00			Χ				0	0	0	
Terry Vissing secretary	5 00	X		Χ				0	0	0	
jane stevens Senior Director of Progr	40 00					Х		118,134	0	9,211	

## Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Unrelated business inco	5,936			
Donations and sponsorsh	611,739			
A gency services	514,822			
Dues and Subscriptions	71,961			
Equipment rental and ma	28,389			