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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)

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

OMB No 1545-0047

2010

Open to Public Inspection

A For the 2010 calendar year, or tax year beginning OCT 1, 2010 and ending SEP 30, 2011

B Check if applicable:
☐ Address change
☐ Name change
☐ Initial return
☐ Termin-ated
☐ Amended return
☐ Applica-tion pending

C Name of organization
INDIANA CORN MARKETING COUNCIL

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
5730 W 74TH ST

City or town, state or country, and ZIP + 4
INDIANAPOLIS, IN 46278-1754

F Name and address of principal officer JANE ADE-STEVENS
SAME AS C ABOVE

D Employer identification number
37-1420618

E Telephone number
317-347-3620

G Gross receipts $ 4,654,377.

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

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☐ 501(c)(3) ☒ 501(c) (6) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.INCORN.ORG

K Form of organization: ☐ Corporation ☐ Trust ☐ Association ☒ Other ▶ UNINC

L Year of formation: 1986

M State of legal domicile: IN

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: THE INDIANA CORN MARKETING COUNCIL ("ICMC") WORKS TO ENHANCE THE VALUE OF CORN FOR INDIANA CORN	
	2	Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets	
	3	Number of voting members of the governing body (Part VI, line 1a)	17
	4	Number of independent voting members of the governing body (Part VI, line 1b)	17
	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	0
	6	Total number of volunteers (estimate if necessary)	0
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	0.
	b	Net unrelated business taxable income from Form 990-T, line 34	0.

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	0.	0.
	9	Program service revenue (Part VIII, line 2g)	4,393,427.	4,613,620.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	4,645.	3,666.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,432.	37,091.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,401,504.	4,654,377.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	762,063.	1,113,121.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 0.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	2,806,251.	2,957,121.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	3,568,314.	4,070,242.
	19	Revenue less expenses Subtract line 18 from line 12	833,190.	584,135.

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	2,777,727.	3,386,780.
	21	Total liabilities (Part X, line 26)	656,272.	681,190.
	22	Net assets or fund balances Subtract line 21 from line 20	2,121,455.	2,705,590.

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Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

▶ Signature of officer — Date: 1-25-12

▶ JANE ADE-STEVENS, EXECUTIVE DIRECTOR
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: STEPHEN BLAKE	Preparer's signature: STEPHEN BLAKE	Date: 12/02/11	Check ☐ if self-employed	PTIN
Firm's name ▶ BLUE & CO., LLC			Firm's EIN ▶	
Firm's address ▶ 12800 N MERIDIAN ST SUITE 400 CARMEL, IN 46032			Phone no. 317-848-8920	

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III [X]

1 Briefly describe the organization's mission
THE INDIANA CORN MARKETING COUNCIL ("ICMC") WORKS TO ENHANCE THE VALUE OF CORN FOR INDIANA CORN FARMERS. THE INDIANA GENERAL ASSEMBLY, RECOGNIZING THE IMPORTANCE OF CORN TO THE ECONOMY OF THE STATE, ENACTED THE INDIANA CORN MARKET DEVELOPMENT STATUTE, CURRENTLY

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No
If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No
If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code _____) (Expenses $ _____ including grants of $ _____) (Revenue $ _____)
SOCIETAL INITIATIVE ØCONDUCTS PROJECTS TO DEVELOP AND MAINTAIN STRONG COMMUNICATION PROGRAMS TO PROMOTE INDIANA CORN AND CORN USES WHILE EDUCATING THE PUBLIC, STAKEHOLDERS AND MEDIA ON ISSUES IMPORTANT TO THE AGRICULTURAL INDUSTRY. IN FISCAL YEAR 2011, THIS INITIATIVE TARGETED ACTIVITIES SUCH AS STAKEHOLDER AND ORGANIZATIONAL COMMUNICATIONS.

4b (Code _____) (Expenses $ _____ including grants of $ _____) (Revenue $ _____)
ETHANOL INITIATIVE ØCONDUCTS PROJECTS TO INCREASE THE PRODUCTION, AVAILABILITY, AND USE OF ETHANOL IN INDIANA. IN FISCAL YEAR 2011, THIS INITIATIVE TARGETED ACTIVITIES SUCH AS CONSUMER EDUCATION, ENVIRONMENTAL PROGRAMS, ETHANOL PRODUCTION EXPANSION, TARGET AUDIENCE EDUCATION AND CELLULOSIC RESEARCH.

4c (Code _____) (Expenses $ _____ including grants of $ _____) (Revenue $ _____)
LIVESTOCK INITIATIVE ØCONDUCTS PROJECTS TO INCREASE CONSUMPTION OF CORN AND CORN CO-PRODUCTS FOR A STRONG LIVESTOCK INDUSTRY AND INCREASE THE UTILIZATION OF ETHANOL CO-PRODUCTS BY INDIANA FARM RAISED FISH THROUGH THE GROWTH OF THE INDIANA AQUACULTURE INDUSTRY. IN FISCAL YEAR 2011, THIS INITIATIVE TARGETED ACTIVITIES SUCH AS FARMER EDUCATION, BUSINESS DEVELOPMENT AND EXPANSION, AND LIVESTOCK CO-PRODUCT RESEARCH AND STUDIES.

4d Other program services (Describe in Schedule O)
(Expenses $ including grants of $) (Revenue $)

4e **Total program service expenses** ▶

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		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		X
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		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, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a		X
b	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*	11b		X
c	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*	11c		X
d	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*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	X	
f	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 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional*	12b		X
13	Is the organization a school 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 United States?	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 United States? *If "Yes," complete Schedule F, Parts I and IV*	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, Parts II and IV*	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, Parts III and IV*	16		X
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		X
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		X
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		X
20a	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? **Note.** Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
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	X	
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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 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		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 lines 24b through 24d and complete Schedule K If "No", go to line 25*	24a		X
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		
d	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	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		X
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		X
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)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2* ☐ Yes ☒ No			
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		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	X	

Part V **Statements Regarding Other IRS Filings and Tax Compliance**

Check if Schedule O contains a response to any question in this Part V ☐

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	91		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		X
b	If "Yes," enter the name of the foreign country ▶ _____ See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		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		X
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).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?		7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h		
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		8		X
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?		9a		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	**Section 501(c)(7) organizations.** Enter				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b			
12a	**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	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note. See the instructions for additional information the organization must report on Schedule O				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*		14b		

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

Check if Schedule O contains a response to any question in this Part VI [X]

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	17		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	17		
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		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 governing documents since the prior Form 990 was filed?		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		X
6	Does the organization have members or stockholders?		6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		7a	X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?		8b	X	
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		X

Section B. Policies *(This Section B requests information about policies not required by the Internal Revenue Code)*

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		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?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this is done*	12c	X	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	X	
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?			
a	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, 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		X
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		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ IN

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 for public inspection Indicate how you make these available Check all that apply

[ ] Own website [X] 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, and financial 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 ▶

ANNA MCCONNELL - 800-735-0195

5730 W 74TH ST, INDIANAPOLIS, IN 46278-1754

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

Check if Schedule O contains a response to any question in this Part VII ☐

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.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees, if any 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, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations

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

☒ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
JOHN WHALEY DIRECTOR	2.00	X						0.	0.	0.
DEAN EPPLEY DIRECTOR	2.00	X						0.	0.	0.
DAVID JOHNSON DIRECTOR	2.00	X						0.	0.	0.
GERALD GAUCK DIRECTOR	2.00	X						0.	0.	0.
MARK BACON DIRECTOR	2.00	X						0.	0.	0.
GLENN CONNER DIRECTOR	2.00	X						0.	0.	0.
RALPH KAUFFMAN DIRECTOR	2.00	X						0.	0.	0.
DAVID GOTTBRATH DIRECTOR	2.00	X						0.	0.	0.
RONNIE MOHR DIRECTOR	2.00	X						0.	0.	0.
MICHAEL NICHOLS DIRECTOR	2.00	X						0.	0.	0.
MICHAEL BUIS DIRECTOR	2.00	X						0.	0.	0.
RANDY KRON DIRECTOR	2.00	X						0.	0.	0.
TOM KNOLLMAN EX OFFICIO	2.00	X						0.	0.	0.
RICHARD YOUNG EX OFFICIO	2.00	X						0.	0.	0.
BRUCE HARTLEY EX OFFICIO	2.00	X						0.	0.	0.
MARSHALL MARTIN EX OFFICIO	2.00	X						0.	0.	0.
LEE PAARLBERG EX OFFICIO	2.00	X						0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees *(continued)*

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
DENNIS WHITSITT DIRECTOR	2.00	X						0.	0.	0.
JEROD CHEW EX OFFICIO	2.00	X						0.	0.	0.
JEAN LEISING EX OFFICIO	2.00	X						0.	0.	0.
JOSEPH PEARSON EX OFFICIO	2.00	X						0.	0.	0.
MICHAEL SHUTER PRESIDENT	2.00			X				0.	0.	0.
DAVID HOWELL VICE-PRESIDENT	2.00			X				0.	0.	0.
GARY LAMIE SECRETARY	2.00			X				0.	0.	0.
DENNIS MAPLE TREASURER	2.00			X				0.	0.	0.
JANE ADE-STEVENS EXECUTIVE DIRECTOR	17.00			X				0.	0.	0.
1b Sub-total ▶								0.	0.	0.
c Total from continuation sheets to Part VII, Section A ▶								0.	0.	0.
d Total (add lines 1b and 1c) ▶								0.	0.	0.

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 ▶ 0

		Yes	No
3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3		X
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 individual*	4		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	5		X

Section 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. NONE

(A) Name and business address	(B) Description of services	(C) Compensation

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 ▶ 0

Part VIII Statement 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
Contributions, gifts, grants and other similar amounts	1a Federated campaigns 1a				
	b Membership dues 1b				
	c Fundraising events 1c				
	d Related organizations 1d				
	e Government grants (contributions) 1e				
	f All other contributions, gifts, grants, and similar amounts not included above 1f				
	g Noncash contributions included in lines 1a-1f $				
	h **Total.** Add lines 1a-1f ▶				
Program Service Revenue		Business Code			
	2a CORN CHECK-OFF ASSESSM	900099	4613620.	4613620.	
	b				
	c				
	d				
	e				
	f All other program service revenue				
	g **Total.** Add lines 2a-2f ▶		4613620.		
	3 Investment income (including dividends, interest, and other similar amounts) ▶		3,666.		3,666.
	4 Income from investment of tax-exempt bond proceeds ▶				
	5 Royalties ▶				
		(i) Real	(ii) Personal		
	6a Gross Rents				
	b Less rental expenses				
	c Rental income or (loss)				
	d Net rental income or (loss) ▶				
		(i) Securities	(ii) Other		
	7a Gross amount from sales of assets other than inventory				
	b Less cost or other basis and sales expenses				
	c Gain or (loss)				
	d Net gain or (loss) ▶				
Other Revenue	8a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c) See Part IV, line 18 a				
	b Less. direct expenses b				
	c Net income or (loss) from fundraising events ▶				
	9a Gross income from gaming activities See Part IV, line 19 a				
	b Less direct expenses b				
	c Net income or (loss) from gaming activities ▶				
	10a Gross sales of inventory, less returns and allowances a				
	b Less cost of goods sold b				
	c Net income or (loss) from sales of inventory ▶				
	Miscellaneous Revenue	Business Code			
	11a MOBILE MARKETING UNIT	900099	30,000.	30,000.	
	b LATE FEES - CORN CHECK	900099	7,091.	7,091.	
	c				
	d All other revenue				
	e **Total.** Add lines 11a-11d ▶		37,091.		
	12 **Total revenue.** See instructions. ▶		4654377.	4650711.	0. 3,666.

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)

Do not include amounts reported on lines 6b, 7b, 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	1,113,121.			
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				
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).				
a Management				
b Legal	7,330.			
c Accounting	41,706.			
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other	101,592.			
12 Advertising and promotion	122,066.			
13 Office expenses	32,263.			
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel	92,836.			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	59,955.			
20 Interest	3,585.			
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	4,940.			
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a ISB CONTRACTED SERVICES	716,516.			
b SPONSORSHIPS AND AWARDS	501,747.			
c STATE OF INDIANA SHARE	481,447.			
d CORN CHECK-OFF REFUNDS	372,551.			
e CONTRACT LABOR	234,241.			
f All other expenses	184,346.			
25 **Total functional expenses.** Add lines 1 through 24f	4,070,242.			
26 **Joint costs.** Check here ▶ ☐ if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

			(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing		1	53,898.
	2	Savings and temporary cash investments	2,652,575.	2	3,321,822.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	55,000.	4	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	70,152.	9	11,060.
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a			
	b	Less accumulated depreciation 10b		10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities See Part IV, line 11		12	
	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	2,777,727.	16	3,386,780.
Liabilities	17	Accounts payable and accrued expenses	265,645.	17	210,235.
	18	Grants payable	265,627.	18	263,371.
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 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	125,000.	25	207,584.
	26	**Total liabilities.** Add lines 17 through 25	656,272.	26	681,190.
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	2,121,455.	27	2,705,590.
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117, check here ▶ [ ] and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	2,121,455.	33	2,705,590.
	34	Total liabilities and net assets/fund balances	2,777,727.	34	3,386,780.

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,654,377.
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,070,242.
3	Revenue less expenses Subtract line 2 from line 1	3	584,135.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,121,455.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	0.
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	2,705,590.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII ☒

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☐ Accrual ☒ Other MODIFIED CASH If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
c	If "Yes" to line 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	X	
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 separate basis, consolidated basis, or both ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate 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		X
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		

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
INDIANA CORN MARKETING COUNCIL

Employer identification number
37-1420618

Part I 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
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can 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? ☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7

1 Purpose(s) of conservation easements held by the organization (check all that apply)
- ☐ Preservation of land for public use (e g , recreation or education)
- ☐ Preservation of an historically important land area
- ☐ Protection of natural habitat
- ☐ Preservation of a certified historic structure
- ☐ Preservation of open space

2 Complete lines 2a through 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 Tax Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), 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

b If the organization elected, as permitted under SFAS 116 (ASC 958), 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 ▶ $ _____

2 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 (ASC 958) relating to these items

a 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 acquisition, 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
d ☐ Loan or exchange programs
e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the 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? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table

		Amount
c	Beginning balance	1c
d	Additions during the year	1d
e	Distributions during the year	1e
f	Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the 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 Net investment earnings, gains, and 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 by

	Yes	No
(i) unrelated organizations 3a(i)		
(ii) related organizations 3a(ii)		
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b		

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				0.

Part VII Investments - Other Securities. See Form 990, Part X, line 12

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶		

Part VIII Investments - Program Related. See Form 990, Part X, line 13

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶		

Part IX Other Assets. See Form 990, Part X, line 15

	(a) Description	(b) Book value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 15.)* ▶		

Part X Other Liabilities. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Amount
(1)	Federal income taxes	
(2)	STATE OF INDIANA'S SHARE OF NET	
(3)	CORN CHECKOFF ASSESSMENTS	181,659.
(4)	REFUNDABLE ADVANCE	25,925.
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
(11)		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25.)* ▶		207,584.

2. FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	4,654,377.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	4,070,242.
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	584,135.
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 through 8	9	0.
10	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	10	584,135.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	3,689,935.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d	-964,442.		
e	Add lines 2a through 2d			2e	-964,442.
3	Subtract line 2e from line 1			3	4,654,377.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines 4a and 4b			4c	0.
5	Total revenue Add lines 3 and 4c. *(This must equal Form 990, Part I, line 12)*			5	4,654,377.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	3,105,800.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	3,105,800.
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			
b	Other (Describe in Part XIV)	4b	964,442.		
c	Add lines 4a and 4b			4c	964,442.
5	Total expenses Add lines 3 and 4c. *(This must equal Form 990, Part I, line 18.)*			5	4,070,242.

Part XIV Supplemental Information

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, line 2, 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

PART XII, LINE 2D - OTHER ADJUSTMENTS:

FIRST PURCHASER HANDLING FEES	-110,444.
CORN CHECK-OFF REFUNDS	-372,551.
STATE OF INDIANA'S SHARE OF COLLECTIONS	-481,447.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	-964,442.

PART XIII, LINE 4B - OTHER ADJUSTMENTS:

Part XIV Supplemental Information *(continued)*

FIRST PURCHASER HANDLING FEES	110,444.
CORN CHECK-OFF REFUNDS	372,551.
STATE OF INDIANA'S SHARE OF COLLECTIONS	481,447.
TOTAL TO SCHEDULE D, PART XIII, LINE 4B	964,442.

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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

▶ **Attach to Form 990.**

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
INDIANA CORN MARKETING COUNCIL

Employer identification number
37-1420618

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [X] Yes [ ] No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000 Check this box if no one recipient received more than $5,000 Part II can be duplicated if additional space is needed ▶ [ ]

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL CORN GROWERS ASSOCIATION 632 CEPI DR CHESTERFIELD, MO 63005	42-0897662	501(C)(5)	411,000.	0.			TO SUPPORT BASIC PROGRAMS AND SERVICES.
PURDUE UNIVERSITY 23510 NETWORK PLACE CHICAGO, IL 60673-1235	35-6002041	501(C)(3)	120,000.	0.			2011 STUDENT CORN CONTEST
PURDUE UNIVERSITY 23510 NETWORK PLACE CHICAGO, IL 60673-1235	35-6002041	501(C)(3)	29,371.	0.			FINDING SOLUTIONS TO DIPLOPIA EAR ROT FOR CORN
PURDUE UNIVERSITY 23510 NETWORK PLACE CHICAGO, IL 60673-1235	35-6002041	501(C)(3)	25,000.	0.			IMPROVING NUTRIENT COMPOSITION, CONSISTENCY, AND MARKETABILITY OF DISTILLERS GRAINS AND
PURDUE UNIVERSITY 23510 NETWORK PLACE CHICAGO, IL 60673-1235	35-6002041	501(C)(3)	29,026.	0.			DEVELOPING MANAGEMENT PLANS FOR TWO KEY PESTS OF INDIANA NO-TILL CORN SYSTEMS: WESTERN BEAN
INFORMA PO BOX 33282 HARTFORD, CT 06150-3282	62-1011283		39,000.	0.			INFORMA - EVALUATE GRAIN TRANSPORTATION INFRASTRUCTURE

2 Enter total number of section 501(c)(3) and government organizations ▶

3 Enter total number of other organizations ▶

LHA **For Paperwork Reduction Act Notice, see the Instructions for Form 990.** **Schedule I (Form 990) (2010)**

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

032101 01-13-11

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II)

(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
INFORMA PO BOX 33282 HARTFORD, CT 06150-3282	62-1011283		13,250.	0.			ECONOMIC IMPACT OF THE ETHANOL INDUSTRY ON INDIANA ECONOMY
PURDUE UNIVERSITY 23510 NETWORK PLACE CHICAGO, IL 60673-1235	35-6002041	501(C)(3)	96,684.	0.			EVALUATION OF INTEGRATED TILLAGE, NITROGEN FERTILIZER, AND NITRIFICATION INHIBITOR
PURDUE UNIVERSITY 23510 NETWORK PLACE CHICAGO, IL 60673-1235	35-6002041	501(C)(3)	71,105.	0.			CORN-BASED BIOFUEL CO-PRODUCT FORAGE ALTERNATIVEES
PURDUE UNIVERSITY 23510 NETWORK PLACE CHICAGO, IL 60673-1235	35-6002041	501(C)(3)	55,000.	0.			OPTIMIZING PROFITABILITY AND IMPROVING SUSTAINABILITY OF CORN PRODUCTION PRACTICES FOR
PURDUE UNIVERSITY 23510 NETWORK PLACE CHICAGO, IL 60673-1235	35-6002041	501(C)(3)	27,688.	0.			EVALUATION OF FACTORS LIMITING DDGS INCLUSION IN DAIRY DIETS.
PURDUE UNIVERSITY 23510 NETWORK PLACE CHICAGO, IL 60673-1235	35-6002041	501(C)(3)	58,119.	0.			ESTIMATION OF THE CORN/SOYBEAN IMPACTS OF DEVELOPMENT OF VIABLE MARKETS FOR CORN STOVER
PURDUE UNIVERSITY 23510 NETWORK PLACE CHICAGO, IL 60673-1235	35-6002041	501(C)(3)	35,405.	0.			SURVEY OF AVAIL APPLICATION & ECONOMIC VALUE OF POULTRY MANURE
PURDUE UNIVERSITY 23510 NETWORK PLACE CHICAGO, IL 60673-1235	35-6002041	501(C)(3)	4,250.	0.			PURDUE GRAIN SAFETY PROJECT
PURDUE UNIVERSITY 23510 NETWORK PLACE CHICAGO, IL 60673-1235	35-6002041	501(C)(3)	14,496.	0.			IMPACT ANALYSIS OF COUNTY WHEEL TAX ADOPTION IN INDIANA

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II)

(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
GEO SILOS 3944 STATE ROAD 327 AUBURN , IN 46706	45-2727914		20,775.	0.			DEVELOPMENT OF A STATEWIDE MAPPING RESOURCE
AG TECH ENVIRONMENTAL STEARDSHIP 1255 SW PRARIE TRAIL PARKWAY ANKENY, IA 50023	42-1510504		50,000.	0.			ON FARM NETWORK
AG TECH ENVIRONMENTAL STEARDSHIP 1255 SW PRARIE TRAIL PARKWAY ANKENY, IA 50023	42-1510504		12,952.	0.			INDIANA ON FARM

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22
Part III can be duplicated 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 (book, FMV, appraisal, other)	(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

SCHEDULE I, PART I, LINE 2: THE GRANTS ARE LOGGED INTERNALLY IN A SPREADSHEET. THIS SPREADSHEET IS THEN USED TO MONITOR ALL GRANT MONIES PAID DURING THE GRANT PERIOD AND THE END OF THE GRANT PERIOD. THE GRANTEE MUST PROVIDE AN END OF GRANT PERIOD REPORT THAT DETAILS THE OUTCOME OF MONIES SPENT.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: PURDUE UNIVERSITY

(H) PURPOSE OF GRANT OR ASSISTANCE: IMPROVING NUTRIENT COMPOSITION,

Part IV Supplemental Information

CONSISTENCY, AND MARKETABILITY OF DISTILLERS GRAINS AND CORN STALKS FOR LIVESTOCK PRODUCTION

NAME OF ORGANIZATION OR GOVERNMENT: PURDUE UNIVERSITY

(H) PURPOSE OF GRANT OR ASSISTANCE: DEVELOPING MANAGEMENT PLANS FOR TWO KEY PESTS OF INDIANA NO-TILL CORN SYSTEMS: WESTERN BEAN CUTWORM AND EAR-ROT FUNGI

NAME OF ORGANIZATION OR GOVERNMENT: PURDUE UNIVERSITY

(H) PURPOSE OF GRANT OR ASSISTANCE: EVALUATION OF INTEGRATED TILLAGE, NITROGEN FERTILIZER, AND NITRIFICATION INHIBITOR EFFECTS ON NITROUS OXIDE EMISSION REDUCTION, NITROGEN USE EFFICIENCY AND CORN YIELD

NAME OF ORGANIZATION OR GOVERNMENT: PURDUE UNIVERSITY

(H) PURPOSE OF GRANT OR ASSISTANCE: OPTIMIZING PROFITABILITY AND IMPROVING SUSTAINABILITY OF CORN PRODUCTION PRACTICES FOR INDIANA

SCHEDULE O
(Form 990 or 990-EZ)
Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047
2010
Open to Public Inspection

Name of the organization
INDIANA CORN MARKETING COUNCIL

Employer identification number
37-1420618

FORM 990, PART I, ITEM K, OTHER ORGANIZATION TYPE:

UNINCORPORATED

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

FARMERS. THE INDIANA GENERAL ASSEMBLY, RECOGNIZING THE IMPORTANCE OF CORN TO THE ECONOMY OF THE STATE, ENACTED THE INDIANA CORN MARKET DEVELOPMENT STATUTE, CURRENTLY CODIFIED IN IND. CODE 15-15-12 ("THE STATUTE") WHICH REQUIRES A CHECKOFF ASSESSMENT ON CERTAIN TYPES OF CORN MARKETED IN THE STATE OF INDIANA. THE ICMC IS A PUBLIC BODY CORPORATE AND POLITIC ORGANIZATION LOCATED IN INDIANAPOLIS, INDIANA ESTABLISHED TO FACILITATE THE CORN CHECKOFF ASSESSMENT PROGRAM IN INDIANA AND COMMUNICATE INFORMATION RELATING TO THE CONDUCT, IMPLEMENTATION, OR RESULTS OF PROMOTION, RESEARCH, AND MARKET DEVELOPMENT ACTIVITIES RELATING TO CORN OR CORN PRODUCTS TO APPROPRIATE GOVERNMENT OFFICIALS. PROCEEDS OF THE CHECKOFF ASSESSMENT MAY NOT BE USED TO INFLUENCE LEGISLATION OR GOVERNMENTAL ACTION OR POLICY.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

CODIFIED IN IND. CODE 15-15-12 ("THE STATUTE") WHICH REQUIRES A CHECKOFF ASSESSMENT ON CERTAIN TYPES OF CORN MARKETED IN THE STATE OF INDIANA. THE ICMC IS A PUBLIC BODY CORPORATE AND POLITIC ORGANIZATION LOCATED IN INDIANAPOLIS, INDIANA ESTABLISHED TO FACILITATE THE CORN CHECKOFF ASSESSMENT PROGRAM IN INDIANA AND COMMUNICATE INFORMATION RELATING TO THE CONDUCT, IMPLEMENTATION, OR RESULTS OF PROMOTION, RESEARCH, AND MARKET DEVELOPMENT ACTIVITIES RELATING TO CORN OR CORN PRODUCTS TO APPROPRIATE GOVERNMENT OFFICIALS. PROCEEDS OF THE CHECKOFF

Name of the organization: INDIANA CORN MARKETING COUNCIL | Employer identification number: 37-1420618

ASSESSMENT MAY NOT BE USED TO INFLUENCE LEGISLATION OR GOVERNMENTAL ACTION OR POLICY.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

SUPPLY AND INFRASTRUCTURE INITIATIVE - CONDUCTS PROJECTS TO INCREASE CORN PRODUCTION THROUGH INNOVATIVE GRAIN MARKETING EFFORTS WHICH INCLUDE GRAIN QUALITY IMPROVEMENT, TRANSPORTATION IMPROVEMENT, AND PRODUCTION RESEARCH AND INTERNATIONAL MARKETING EFFORTS. IN FISCAL YEAR 2011, THIS INITIATIVE TARGETED ACTIVITIES SUCH AS CORN PRODUCTION, MARKETING/MARKET DEVELOPMENT, AND TRANSPORTATION AND INFRASTRUCTURE.

NEW USES INITIATIVE ∅CONDUCTS PROJECTS TO INVEST IN RESEARCH AND DEVELOPMENT THAT WILL FIND ECONOMICALLY SOUND NEW USES FOR CORN AND CORN BY-PRODUCTS. IN FISCAL YEAR 2011, THIS INITIATIVE TARGETED ACTIVITIES SUCH AS THE STUDENT CORN INNOVATION COMPETITION.

PROGRAM MANAGEMENT AND LEADERSHIP INITIATIVE ∅INCLUDES EXPENSES RELATING TO BOARD MEETINGS, LEADERSHIP DEVELOPMENT AND PROGRAM MANAGEMENT AND SUPPORT FOR THE OTHER INITIATIVES.

FORM 990, PART VI, SECTION A, LINE 7A: FARMERS MAY ELECT ONE OR MORE MEMBERS OF THE GOVERNING BODY.

FORM 990, PART VI, SECTION B, LINE 11: THE BUDGET & FINANCE COMMITTEE WILL REVIEW AND APPROVE THE 990 FOR FILING. A COPY OF THE APPROVED 990 WILL BE

Name of the organization: INDIANA CORN MARKETING COUNCIL

Employer identification number: 37-1420618

PROVIDED TO EACH BOARD MEMBER PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C: AN INDEPENDENT CONSULTANT WHO SERVES AS THE ORGANIZATION'S COMPLIANCE OFFICER REVIEWS AND MONITORS THE COMPLETED CONFLICT OF INTEREST STATEMENTS REGULARLY.

FORM 990, PART VI, SECTION C, LINE 19: THE FINANCIAL STATEMENTS AND ANNUAL REPORTS ARE AVAILABLE UPON REQUEST. THE ANNUAL REPORT APPEARS ANNUALLY IN THE "INDIANA SOYBEAN & CORN REVIEW" MAGAZINE.

FORM 990, PART XII, LINE 1

THE ORGANIZATION PREPARES ITS FINANCIAL STATEMENTS ON A MODIFIED CASH BASIS OF ACCOUNTING. UNDER THAT BASIS, CORN CHECKOFF ASSESSMENTS ARE RECOGNIZED WHEN RECEIVED RATHER THAN WHEN EARNED, AND FIRST PURCHASER HANDLING FEES AND REFUNDS ARE RECOGNIZED WHEN PAID RATHER THAN WHEN THE OBLIGATION IS INCURRED. THE MODIFIED CASH BASIS OF ACCOUNTING DIFFERS FROM ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES PRIMARILY BECAUSE THE ORGANIZATION HAS NOT RECOGNIZED RECEIVABLES FOR CORN CHECKOFF ASSESSMENTS, ACCRUALS FOR ESTIMATED FIRST PURCHASER HANDLING FEES, ACCRUALS FOR ESTIMATED REFUNDS, AND THEIR RELATED EFFECTS ON THE CHANGE IN NET ASSETS. CONTRIBUTIONS ARE RECOGNIZED WHEN PLEDGED BY THE DONOR. ALL OTHER REVENUES ARE RECOGNIZED WHEN EARNED. THE ORGANIZATION ACCRUES THE STATE OF INDIANA'S SHARE OF CORN CHECKOFF ASSESSMENTS RATABLY BASED ON THE MAXIMUM AMOUNT THAT COULD BE DUE ON JULY 1 OF EACH YEAR. THE ORGANIZATION ACCRUES RESEARCH GRANTS IN WHICH THEY HAVE MINIMAL INVOLVEMENT IN THE YEAR THE BOARD APPROVES THE GRANT FOR FUNDING RATHER THAN AT THE TIME THE EXPENSES ARE INCURRED.

RESEARCH GRANTS IN THE THE ORGANIZATION HAS SIGNIFICANT INVOLVEMENT ARE

Name of the organization: INDIANA CORN MARKETING COUNCIL

Employer identification number: 37-1420618

EXPENSED AS INCURRED. ALL OTHER EXPENSES ARE RECOGNIZED ON THE ACCRUAL BASIS.

FORM 990, PART XII,LINE 2C

THE ORGANIZATION HAS A COMMITTEE THAT ASSUMES RESPONSIBILITY FOR THE OVERSIGHT OF THE AUDIT AND THE SELECTION OF AN INDEPENDENT ACCOUNTANT. THIS PROCESS HAS NOT CHANGED FROM PRIOR YEARS.

FORM 990, PART VI, LINE 15A AND 15B

THE COUNCIL DOES NOT HAVE ANY EMPLOYEES. THE COUNCIL PAYS A CONTRACTED FEE TO THE INDIANA SOYBEAN ALLIANCE (ISA) FOR MANAGEMENT SERVICES INCLUDING WORK PERFORMED BY ISA EMPLOYEES.

FORM 990, PART VII, SECTION A

THE COUNCIL DOES NOT HAVE ANY EMPLOYEES. THE COUNCIL PAYS A CONTRACTED FEE TO THE INDIANA SOYBEAN ALLIANCE (ISA) FOR MANAGEMENT SERVICES INCLUDING WORK PERFORMED BY ISA EMPLOYEES.