Extended to November 15, 2019

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public

Inspection

A	For th	e 2018 calendar year, or tax year beginning and	l ending		
В	Check if applicab	C Name of organization		D Employer identifi	ication number
	Addre	ss Illinois FFA Alumni Association			
	Name chang			23-721	15345
	Initial	At the state of th	Room/suite	E Telephone numbe	
	Final	2001 77 - 1164 - 14 7 - 1		217-75	53-3328
	termin		•	G Gross receipts \$	203,453,
	Amen	ded		H(a) Is this a group r	· · · · · · · · · · · · · · · · · · ·
	Appli			for subordinates	s? Yes x No
	pendi	ng 3221 Northfield Drive Springfield IL 6270	Δ S.	H(b) Are all subordinates i	included? Yes No
1	Tax-ex	empt status	or 527	If "No," attach a	a list (see instructions)
J	Websi	te: ▶ illinoisffa.org		H(c) Group exemption	on number 📐
K	Form o	f organization: x Corporation Trust Association/ Other	L Year	of formation: 1971	M State of legal domicile: IL
P	art I	Summary /			
ģ	1	Briefly describe the organization's mission or most significant activities Promot	ion of FF	A member	
Governance		leadership development.			
eru	2	Check this box If the organization discontinued its operations or disposition	sed of more	than 25% of its net a	ssets
ۄۣٚڿ	3	Number of voting members of the governing body (Part VI, line 1a)		3	20
~ ∞	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	20
es	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)		5	0
} Activities	6	Total number of volunteers (estimate if necessary)		6	70
٦٩	7 a	Total unrelated business revenue from Part VIII, column (C), line RECEIVE	ED	<u>,</u>	1
Ն	b	Net unrelated business taxable income from Form 990-T, ine 98		7b	
\subset		Contributions and grants (Part VIII, line 1h) NOV 1 9 20	19 080-84	Prior Year	Current Year
Lia	8	1 1)'' [[]	9,011.	6,750.
Z Š	9	Program service revenue (Part VIII, line 2g)		53,122,	54,535.
FOANT OF	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d) OGDEN,	<u> </u>	54.	76 254
()	11 12	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		79,665.	76,254,
(÷	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		141,852. 19,925.	137,539,
	14	Benefits paid to or for members (Part IX, column (A), line 4)	-	19,925.	0.
ιn.	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.
Se	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Expenses	Ь	Total fundraising expenses (Part IX, column (D), line 25)	0.		
ũ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		110,739,	90,423,
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	,	130 664	111 486
	19	Revenue less expenses Subtract line 18 from line 12		11,188,	26,053,
200	3		Ве	ginning of Current Year	End of Year
Net Assets or Find Balances	20	Total assets (Part X, line 16)		49,623.	101,176.
t As	21	Total liabilities (Part X, line 26)		0.	0.
2	22	Net assets or fund balances Subtract line 21 from line 20		49,623,	101 176.
	art II	Signature Block			
		alties of perjury, I declare that I have examined this return, including accompanying schedul			ny knowledge and belief, it is
true	, corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of w	hich preparer	1 / 4	4
		Signature of officer Church Signature of officer		Stover	aber 12, 2019
Sig				Date	•
He	re	Melinda Bunselmeyer, Executive Director Type or print name and title			. —
_				Date Check [PTIN
Pai	4	Print/Type preparer's name Preparer's signature		12 11-19 1	 -1
	u parer	Allen K. Murphy CPA		·	
	Only	Firm's pame Murphy & Associates CPAs LLC	-	Firm's EIN	27-4404526
096	Only	Firm's address 2501 Chatham Rd, Ste 120		Dhone no 700	17) 544 2120
Ma	v the I	Springfield, IL 62704 RS discuss this return with the preparer shown above? (see instructions)			17) 544-2120 x Yes No
ivia	yulel	RS discuss this return with the preparer shown above? (see instructions)			Yes No

	1990 (2018) Illinois FFA Alumni Association	23-7215345	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission		
•			
	Promotion of FFA member leadership developement		
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 🗓 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		
		manaurad by ava	2222
4	Describe the organization's program service accomplishments for each of its three largest program services, as		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	ars, the total expen	ises, and
	revenue, if any, for each program service reported		
4a	(Code) (Expenses \$ including grants of \$) (Reven	ue \$)
	FFA officer developement-provides scholarships to local FFA chapter		
	members and State officers to offset the costs of leadership programs		
	and conferences.		
	<u></u>		
	<u>. C.</u>		
	<u> </u>		
	· · · · · · · · · · · · · · · · · · ·		
46	/a		•
4b	(Code) (Expenses \$ including grants of \$) (Reven	ue \$	
	Membership dues and administrative support for programs		
			
			 -
4c	(Code) (Expenses \$ including grants of \$) (Reven	ue \$)
	Scholarships		
	5000000		
			
	· · · · · · · · · · · · · · · · · · ·		
	· ·		
	· · · · · · · · · · · · · · · · · · ·		
		_	
4d	Other program services (Describe in Schedule O)		
	(Expenses \$ including grants of \$) (Revenue \$)	
40	Total program service expenses		,

	Form	990	(2018)	
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Form 990 (2018)

111inois FFA Alumni Association

Part IV Checklist of Required Schedules

			res	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	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3_		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, 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	х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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		х
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, for escrow or custodial account liability, 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		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI .	11a	Х	
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		<u> </u>
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		<u> </u>
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
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
T	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	446		
10-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		<u> </u>
128	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		х
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	120		
D	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII 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
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		x
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
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		х_
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	х	<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			1
	complete Schedule G, Part III	19	х	
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		├─
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	COMPENIC COMPRIMEDITOR PARTIX COMPRIMED INC. 17 IT "YES," COMPLETE SCREAMINET PARTY LAND !!	- 71	·v	i

	1990 (2018) Illinois FFA Alumni Association 23-72153	45	P	age 4
Pa	rt IV Checklist of Required Schedules (continued)		T	
	Delthe second of the first of the second of	ſ	Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	000		l
~	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	000		<u></u>
04-	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	045		,,
.	Schedule K. If "No," go to line 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b	 	Х
	Did the organization minest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
C	any tax-exempt bonds?	24c		
A	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	240		
254	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	250		
b	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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	230		
20	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? 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	20		^
۲,	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? 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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule !., Part IV	28a		x
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		х
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
Ū	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		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			<u> </u>
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	,		İ
	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	<u> </u>	х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	х	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V			\Box
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	_2	1]
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	2		1

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

(gambling) winnings to prize winners?

Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V Yes No 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 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? За b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, 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 FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b Х 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 as charitable contributions? 6a Х b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b 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? 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 Х d If "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f 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 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 9 Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? 9a Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b Section 501(c)(7) organizations. Enter 10 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 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 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 Х b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 15 If "Yes," see instructions and file Form 4720, Schedule N Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16

If "Yes," complete Form 4720, Schedule O

Illinois FFA Alumni Association 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 or note to any line in this Part VI 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 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. b Enter the number of voting members included in line 1a, above, who are independent 20 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 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? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Х 5 Did the organization become aware during the year of a significant diversion of the organization's assets? X Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? 8a Each committee with authority to act on behalf of the governing body? 8b 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No 10a 10a Did the organization have local chapters, branches, or affiliates? Х b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Woro officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c Did the organization have a written whistleblower policy? 13 13 x Did the organization have a written document retention and destruction policy? 14 Х 14 Did the process for determining compensation of the following persons include a review and approval by independent 15 persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a a The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization 15b 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 b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed None Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply ___ Own website __ Another's website x Upon request Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial 19

State the name, address, and telephone number of the person who possesses the organization's books and records

statements available to the public during the tax year

3221 Northfield Drive Springfield IL 62702

The Organization - 217-753-3328

23-7215345 Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response or	r note to any	y line in this Part VII
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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

(A) Name and Title	(B) Average hours per week	box	not c , unle cer an	Pos heck ss pe	more rson	than is bot	h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other	
	(list any hours for related organizations below line)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
(1) Rick Duchow	1.00			 !-	,						
District 1 Director		X		_				0.	0.	0.	
(2) Dean Olson	1.00			,							
District 1 Director		х	<u> </u>	Į ,			'	0,	0.	0.	
(3) Kenton Carley	1.00										
District 2 Director		x						0.	0.	0,	
(4) Ron Lynch	1.00										
District 2 Director		x						0.	0.	0,	
(5) Terry Brown	1.00										
District 3 Director		x						0.	0.	0,	
(6) Angie Vanatta	1.00										
District 4 Director		x						0.	0.	0.	
(7) Kyle Wright	1.00										
District 4 Director		x						0.	0.	0.	
(8) Ted Hughs	1.00										
District 5 Director		x						0.	0.	0	
(9) David White	1.00				,						
District 5 Director		x						0.	0.	0	
(10) Richard DeSchepper	1.00										
Past President		x						0.	0.	0	
(11) Connor Carmody	1.00										
Past State Officer		x			•		ŀ	0.	0.	0	
(12) Paxton Morse	1.00										
Past State Officer		x						0.	0.	0	
(13) Dalton Painter	1.00										
Past State Officer		x						0.	0.	0	
(14) Steve Yandell	1.00										
President	·			x				0.	0.	0	
(15) Bill Kittinger	1.00	:									
Vice President		1.		х				0.	0.	0	
(16) Elliott Hasselbging	1.00							-			
Secretary				x			1	0.	0.	0	
(17) Kim Mahr	1.00										
Reporter	,,,,	1		x	l	1		0.	0.	0	

Part VII Section A, Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (A)	Form 990 (2018) Illinois FFA	Alumni Ass	oci	ati	on					23-7215	<u>345</u>		P	age 8
Name and title Average hours for related of grantations are not related organizations and related organizations are not likely 1	Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, an	d Hi	ghe	st C	ompensated Employe	es (continued)				_
Sub-total Compensation Compens	(A)	(B)							(D)	(E)			(F)	
Compensation Comp	Name and title	Average	/40						Reportable	Reportable	i	E۶	stimate	ed
to start the hours for related organizations (W2/1099-MISC) with the organizations organizations organizations (W2/1099-MISC) with the organizations organizations organizations organizations organizations the organizations or		(do not check more than one				compensation	, ,	an	nount	of				
Treasurer Treasurer 1,00		week	offi	cer ar	nd a d	Irecto	or/trus	tee)	, l ' l ' l ' ' l ' ' ' ' ' ' ' ' ' ' '				other	
Treasurer Treasurer 1,00		, ,	ector						the	organizations		com	pensa	tion
Treasurer Treasurer 1,00		i .	Į į	۱			ted		_	(W-2/1099-MIS	2)	fr	rom th	е
Treasurer Treasurer 1,00			ste (aste			Busa		(W-2/1099-MISC)		ŀ	org	anızat	ion
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Treasurer 1,00		· ·	Ĭ	을	ੈਂ	ē.	풀를	æ				├─		
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Name and business address NONE Description of services Compensation														
Name and business address NONE Description of services Compensation	(A)	•							(B)			((
· · · · · · · · · · · · · · · · · · ·		address .	NO	NE					Description of s	services	C			n
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· · · · · · · · · · · · · · · · · · ·	A Table when a first													
	•	•	ot li	mıte	d to			sted	above) who received n	nore than				

23-7215345

Form 990 (2018) Illinois FFA Alumni Association
Part VIII Statement of Revenue

		Check if Schedule O conta	ains a response	or note to any lin	e in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
ts ts	1 6	a Federated campaigns	1a	-				
ran	ì	b Membership dues	1b					
λ, T		Fundraising events	1c					
iifte ar /		d Related organizations	1d					
s, G mil		e Government grants (contributi		·				'
ion r Si		All other contributions, gifts, grant	· —	-				
but		similar amounts not included abov		6,750.				
nti d O	ç	Noncash contributions included in lines	1a-1f \$,				'
Contributions, Gifts, Grants and Other Similar Amounts		h Total. Add lines 1a-1f		<u> </u>	6.750			
				Business Code				
e .	2 a	Membership dues		900099	54,535.	54,535,		
e vi		b				-		
Program Service Revenue								
eve		d						
og. H	•	e			•			
P.	f	All other program service reve	nue					
		Total. Add lines 2a-2f		•	54 535.	<u></u>		
	3	Investment income (including	dıvıdends, ınte	rest, and	ř			
		other similar amounts)		. •				
	4	Income from investment of tax	exempt bond	proceeds 🔭 🕨				
	5	Royalties		•				
			(ı) Real	(II) Personal	i			
	6 a	Gross rents			ı			
	t	b Less rental expenses			:			
	(Rental income or (loss)		-	1			
	•	d Net rental income or (loss)						
	7 a	a Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory						
	t	Less cost or other basis						
		and sales expenses						
	•	Gain or (loss)	<u> </u>		-			
		d Net gain or (loss)		•				
ņ	8 8	a Gross income from fundraising	,					
Other Reven		including \$	of					
Re		contributions reported on line	1c) See					
Je.	_	Part IV, line 18		35,365.				
ō		Less direct expenses		7,724.				
l		Net income or (loss) from fund	-		27,641.			27,641.
	9 2	Gross income from gaming ac						i
		Part IV, line 19 Less direct expenses		34,296.				
		Net income or (loss) from gam	_	26,455.				
		a Gross sales of inventory, less	_	,	7,841.			7,841.
	10 6	and allowances		E3 272				
		Less cost of goods sold	, 6 k					
		Net income or (loss) from sales		31,735.	21 520			
		Miscellaneous Revenue		Business Code	21,538.	21,538,		
	11 -	Annual meeting	<u>-</u>	900099	15,900.	15,900.		1
		Miscellaneous	-	900099	3,334.	3,334.		
				700077		J, JJ4.		1
		d All other revenue						
		Total. Add lines 11a-11d		•	19,234.			
	12	Total revenue See instructions			137 539.	95,307.	0.	35,482,

Part IX Statement of Functional Expenses	
Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete co	olumn (A)

	Check if Schedule O contains a response or note to any line in this Part IX						
	not include amounts reported on lines 6b, 3b, 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 domestic organizations						
	and domestic governments. See Part IV, line 21	21,063.					
2	Grants and other assistance to domestic						
	individuals See Part IV, line 22						
3	Grants and other assistance to foreign						
	organizations, foreign governments, and foreign						
	individuals See Part IV, lines 15 and 16		_		<u>'</u>		
4	Benefits paid to or for members	<u> </u>					
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 accruals and contributions (include						
	section 401(k) and 403(b) employer contributions)						
9	Other employee benefits						
10	Payroli taxes						
11	Fees for services (non-employees)						
а	Management	100	•				
b	Legal			•			
С	Accounting	1,675.					
	Lobbying						
е	Professional fundraising services. See Part IV, line 17		, •	•			
f	Investment management fees						
g	Other (If line 11g amount exceeds 10% of line 25,						
	column (A) amount, list line 11g expenses on Sch O.)	·					
12	Advertising and promotion .			•			
13	Office expenses						
14	Information technology						
15	Royalties						
16	Occupancy						
17	Travel .						
18	Payments of travel or entertainment expenses						
	for any federal, state, or local public officials			<u> </u>			
19	Conferences, conventions, and meetings	16,187.					
20	Interest						
21	Payments to affiliates		•				
22	Depreciation, depletion, and amortization	3,189,					
23	Insurance						
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)	- -	,	-	1		
	amount, list line 24e expenses on Schedule O.)		- -				
a	Dues	35,820.	<u> </u>				
b	Administrative fees	30,000.	 	<u> </u>			
C	Trailer expense	3,018,			-		
d	Miscellaneous	529.					
e or	All other expenses Add lines 1 through 34s	- 5.					
<u>25</u>	Total functional expenses Add lines 1 through 24e	111,486,					
26	Joint costs. Complete this line only if the organization						
	reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.	_					
	Check here If following SOP 98-2 (ASC 958-720)	- -					
	ii lollowilly 30F 96-2 (A30 936-720)			L	i		

_	990 (; t X	2018) Illinois FFA Alumni Association Balance Sheet		23-7215	345 Page 11
ra	١٨_				
		Check if Schedule O contains a response or note to any line in this Part X	(A)		(B)
			(A) Beginning of year		End of year
	1	Cash - non-interest-bearing	42,375.	1	38,482.
	2	Savings and temporary cash investments	7,248,	2	37,194.
	3	Pledges and grants receivable, net	•	3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing	g		
•		employers and sponsoring organizations of section 501(c)(9) voluntary			
ţ		employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
æ	8	Inventories for sale or use		8	21,000.
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or other			
		basis Complete Part VI of Schedule D 10a 4,500	<u>o</u> ,		
	b	Less accumulated depreciation . 10b	0. 0.	10c	4.500.
	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)	49,623	16	101,176.
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees,			
ij		key employees, highest compensated employees, and disqualified persons	•		
Lia E		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 (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of			
		Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0.	26	0.
	20	Organizations that follow SFAS 117 (ASC 958), check here ▶ 🗓 and		=0	
S		complete lines 27 through 29, and lines 33 and 34.			
Fund Balances	27	Unrestricted net assets	49,623,	27	101,176.
ala.	28	Temporarily restricted net assets	25,085,	28	101,170
ě	29	Permanently restricted net assets		29	
Ş		Organizations that do not follow SFAS 117 (ASC 958), check here			
ρ		and complete lines 30 through 34.			
sts (30	Capital stock or trust principal, or current funds		30	
1556	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets	32	Retained earnings, endowment, accumulated income, or other funds		32	
ž	33	Total net assets or fund balances	49,623	33	101,176.
	34	Total liabilities and net assets/fund balances	49 623	34	101 176.

Form	1990 (2018) Illinois FFA Alumni Association	23-7215345		Pag	_{ge} 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				x
1	Total revenue (must equal Part VIII, column (A), line 12)	1		137	<u>539</u> .
2	Total expenses (must equal Part IX, column (A), line 25)	2		111	486.
3	Revenue less expenses Subtract line 2 from line 1	3		26	053.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		49	623.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		25	500.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10		101	176.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII .	_			oxdot
				Yes	No
1	Accounting method used to prepare the Form 990 x Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0		i	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				*
b	Were the organization's financial statements audited by an independent accountant?		2b		<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2ლ		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	Act and OMB Circular A-133?		3a		<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	2018)

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. ➤ Attach to Form 990 or Form 990-EZ. ➤ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- 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

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

	, (See Separate misa detions), then				
	Section 501(c)(4), (5), or (6) organization	tions Complete Part III		.	
Nan	ne of organization			Empl	oyer identification number
_	Illinois FI	A Alumni Association			23-7215345
P	art I-A Complete if the org	janization is exempt und	ler section 501(c) (or is a section 527 o	rganization.
1	Provide a description of the organiz	ation's direct and indirect politic	al campaign activities in	Part IV	
2	Political campaign activity expendit	ures	-	▶ \$	
3	Volunteer hours for political campai	gn activities			
Pá	art I-B Complete if the org	janization is exempt und	ler section 501(c)(3).	
1	Enter the amount of any excise tax	incurred by the organization uno	der section 4955	· • \$	
2	Enter the amount of any excise tax	incurred by organization manage	ers under section 4955	▶\$	
3	If the organization incurred a section	n 4955 tax, did it file Form 4720	for this year?		Yes No
48	Was a correction made?				Yes No
t	If "Yes," describe in Part IV				
Pa	art I-C Complete if the org	anization is exempt und	ler section 501(c),	except section 501(c)(3).
1	Enter the amount directly expended	by the filing organization for se	ction 527 exempt functi	on activities > \$	
2	Enter the amount of the filing organ	ization's funds contributed to ot	her organizations for se-	ction 527	
	exempt function activities			. ▶\$	
3	Total exempt function expenditures	Add lines 1 and 2 Enter here a	and on Form 1120-POL,		
	line 17b	τ		▶\$	
4	Did the filing organization file Form	1120-POL for this year?			Yes No
5	Enter the names, addresses and en	nployer identification number (El	N) of all section 527 pol	itical organizations to whic	h the filing organization
	made payments For each organiza	tion listed, enter the amount pair	d from the filing organiza	ation's funds. Also enter th	e amount of political
	contributions received that were pre-	omptly and directly delivered to	a separate political orga	nization, such as a separa	te segregated fund or a
	political action committee (PAC) If	additional space is needed, prov	vide information in Part I	V	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's	contributions received and
			· ·	funds If none, enter -0-	promptly and directly delivered to a separate
					political organization
					If none, enter -0-
_					
			**		
			`		
				1	
_			-		
_			<u></u>		
_		- - -			

Schedule C (Form 990 or 990-EZ) 2018	Illinois FFA Alu	mni Association		23-72	15345 Page 2
Part II-A Complete if the org	anization is exe	mpt under sectio	n 501(c)(3) and file	ed Form 5768 (e	lection under
section 501(h)).		- 	·		
A Check 🕨 📖 if the filing organiza	tion belongs to an aff	lliated group (and list in	n Part IV each affiliated	group member's nar	ne, address, EIN,
	e of excess lobbying	expenditures)			
B Check 🕨 🔛 if the filing organiza	tion checked box A a	nd "limited control" pro	ovisions apply		. -
	ts on Lobbying Expe litures" means amou	nditures unts paid or incurred.		(a) Filing organization's totals	(b) Affiliated group totals
4 - Total labbung avangetures to infli	rence authlic carrier ((arasa rasta labbuma)			
1a Total lobbying expenditures to infli	•		-		
b Total lobbying expenditures to influ		dy (direct lobbying)	}		
 c Total lobbying expenditures (add li d Other exempt purpose expenditure 	•		-		-
e Total exempt purpose expenditure		4/	}		
f Lobbying nontaxable amount Ente		-	h columns		
If the amount on line 1e, column (a) of		bying nontaxable am			
Not over \$500,000		the amount on line 1e	ount is.		,
Over \$500,000 but not over \$1,000		00 plus 15% of the exc	ess over \$500 000		
Over \$1,000,000 but not over \$1,5		00 plus 10% of the exc	· 1		
Over \$1,500,000 but not over \$17,		00 plus 5% of the exce			
Over \$17,000,000	\$1,000.	•	1		
	ή ψή,οοο,				
g Grassroots nontaxable amount (er	ter 25% of line 1f)				
h Subtract line 1g from line 1a if zer	•	•		1.1-1	
i Subtract line 1f from line 1c If zero		•			
j If there is an amount other than ze		line 1:, did the organiz	ation file Form 4720		
reporting section 4911 tax for this		– įĐ, Ξ 	,		Yes No
		eraging Period Under	Section 501(h)		
(Some organizations the	nat made a section 5		have to complete all o	of the five columns I	below.
	Lobbying Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2a Lobbying nontaxable amount		ŕ			
b Lobbying ceiling amount	_		•		
(150% of line 2a, column(e))	·				<u> </u>
c Total lobbying expenditures					
d Grassroots nontaxable amount		'	(
e Grassroots ceiling amount					
(150% of line 2d, column (e))					
(23, 65.6 (6))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2018

Schedule C (Form 990 or 990 EZ) 2018 Illinois FFA Alumni Association 23-7215345 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

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 volunteers? Pald staff or management (include compensation in expenses reported on lines 1c through 1i)? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If if he filing organization incurred a section 4912 tax, did it file Form 4720 for this year? If III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues if notices were sent and the amount on line 2 exceeds the amount on line 3, what portion of the ex does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and doe	the prior year ion 501(c) d "No," Of	1 2 3 (5), or se	Yes x	N 2
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of a Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? It III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the organization agree to carry over lobbying and political campaign activity expenditures from the full-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Occarryover from last year Total	the prior year ion 501(c) d "No," Of	1 2 3)(5), or se R (b) Par	Yes x	2
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of a Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? It III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the organization agree to carry over lobbying and political campaign activity expenditures from the full-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Occarryover from last year Total	the prior year ion 501(c) d "No," Of	1 2 3)(5), or se R (b) Par	Yes x	2
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Nolunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? If III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polit expenses for which the section 527(f) tax was paid). Current year Carryover from last year Carryover from last year Carryover from last year	the prior year ion 501(c) d "No," Of	1 2 3)(5), or se R (b) Par	Yes x	
Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If the filing organization incurred a section 4912 tax, did if file Form 4720 for this year? If III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total	the prior year ion 501(c) d "No," Of	1 2 3)(5), or se R (b) Par	Yes x	
Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? If III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the IIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Carryover from last year Carryover from last year Carryover from last year	the prior year ion 501(c) d "No," Of	1 2 3)(5), or se R (b) Par	Yes x	
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	cess			
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Taxable amount of lobbying and political expenditures (see instructions)		5		
rt IV Supplemental Information				
expenditure next year?		4		
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rt IV Supplemental Information				
ride the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5, Part II-A (affiliated grou	ıp lıst), Part II	II-A, lines 1	and 2 (see	
ructions), and Part II-B, line 1 Also, complete this part for any additional information				
<u> </u>				

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information

OMB No 1545-0047 Inspection

Name of the organization

Illinois FFA Alumni Association

Employer identification number

23-7215345 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate value of contributions to (during year) 2 3 Aggregate value of 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 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 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? Part II Conservation Easements. Complete if the organization answered "Yes" on 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 education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 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 Total acreage restricted by conservation easements. 2b Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 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, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, 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)(i) and section 170(h)(4)(B)(ii)? In Part XIII, 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on 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 XIII, 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) Revenue included on 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 (ASC 958) relating to these items a Revenue included on Form 990, Part VIII, line 1 **▶** \$ b Assets included in Form 990, Part X

		A Alumni Assocı						23-72153		_Page 2
Par	t III Organizations Maintaining C	ollections of Ar	rt, Hist	orical Tr	easures, c	or Oth	er Simil	ar Asse	ts (contini	ued)
3	Using the organization's acquisition, accessi	on, and other record	ls, check	any of the	following tha	t are a s	ignificant	use of its	collection	items
	(check all that apply)									
а	Public exhibition	d	ı <u>ا</u>	Loan or exc	hange progra	ams				
b	Scholarly research	е	- (Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	n how th	ey further t	he organizati	on's exe	mpt purp	ose in Par	t XIII	
5	During the year, did the organization solicit of	r receive donations of	of art, his	storical trea	sures, or oth	er sımıla	r assets	_	_	
	to be sold to raise funds rather than to be ma	aintained as part of t	he orgar	nization's co	ollection?				Yes	No_
Par	t IV Escrow and Custodial Arran	•	ete if the	organizatio	n answered '	'Yes" or	Form 99	0, Part IV,	line 9, or	
	reported an amount on Form 990, Pa									_
1a	Is the organization an agent, trustee, custod	ian or other intermed	liary for	contribution	ns or other as	sets not	ncluded	_	_	
	on Form 990, Part X?								」Yes	└─ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing t	able				r		
									Amount	
C	Beginning balance						1c			
d	Additions during the year						1d	-		
е	Distributions during the year				•		1e			
f	Ending balance						1f			
	Did the organization include an amount on F							L. <u>.</u>	_ Yes	∐ No
	If "Yes," explain the arrangement in Part XIII									
Par	t V Endowment Funds. Complete				1					
		(a) Current year	(b) P	rior year	(c) Two year	s back	(d) Three	years back	(e) Four	years back
1a	Beginning of year balance	21			-		-	·		
b	Contributions									
С	Net investment earnings, gains, and losses				<u>.</u>					
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs							,	_	
f	Administrative expenses	-								
g	End of year balance				W 15 - 1-1			_		
2	Provide the estimated percentage of the cur	rent year end balanc	•	g, column (a	aj) neid as					
a	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
С	Temporarily restricted endowment	%								
_	The percentages on lines 2a, 2b, and 2c sho		_4 4b_			rad far	ho organ	zation		
за	Are there endowment funds not in the posse	ession of the organiza	ation tha	it are neio a	ino aoministe	rea ior	ine organi	zation	r.	Yes No
	by.								3a(i)	TES NO
	(i) unrelated organizations									
_	(ii) related organizations	ations listed as roqui	rad on S	chadula D2	•				3a(ii) 3b	
_	If "Yes" on line 3a(ii), are the related organization. Describe in Part XIII the intended uses of the								[30]	
Par	t VI Land, Buildings, and Equipm		Willett	iuiius	.					
	Complete if the organization answere) Part I\	/ line 11a S	See Form 990) Part X	line 10			
	Description of property	(a) Cost or o			t or other		ccumulat	ed	(d) Book	value
	pescription of property	basis (investr		, , ,	(other)	``'	preciation	- 1	(U) DOOK	
	Land				,/		,			
b	Buildings	·								
C	Leasehold improvements									
d	Equipment				4,500.					4,500.
_	Other				3,300.	_				
	. Add lines 1a through 1e (Column (d) must e	equal Form 990, Part	X, colun	nn (B), line	10c)			•		4_500

		ine 11b See Form 990, Part >	
a) Description of security or category (including name of security	(b) Book value	(c) Method of valuation	on Cost or end-of-year market value
Financial derivatives			
Closely-held equity interests			· · · · · · · · · · · · · · · · · · ·
Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
al. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	>		
art VIII Investments - Program Related.			
Complete if the organization answered "Yes		ine 11c See Form 990, Part >	K, line 13
(a) Description of investment	(b) Book value	(c) Method of valuation	on Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			· · · · · · · · · · · · · · · · · · ·
(7)	·		
(8)			
(9)			
tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Ye	s" on Form 990. Part IV	ine 11d. See Form 990. Part 3	X. line 15
	a) Description		(b) Book value
· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	·	
(4)			
(1)			
(2)	· · · · · · · · · · · · · · · · · · ·		
(2)			
(2) (3) (4)	· ·		
(2) (3) (4) (5)	· · · · · · · · · · · · · · · · · · ·		
(2) (3) (4) (5) (6)			
(2) (3) (4) (5) (6) (7)			
(2) (3) (4) (5) (6) (7) (8)	•	-	
(2) (3) (4) (5) (6) (7) (8) (9)			
(2) (3) (4) (5) (6) (7) (8) (9) ttal. (Column (b) must equal Form 990, Part X, col (B)	line 15)		
(2) (3) (4) (5) (6) (7) (8) (9) (stal. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities.			
(2) (3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. Complete if the organization answered "Ye		line 11e or 11f See Form 990	
(2) (3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, col (B) art X Other Liabilities. Complete if the organization answered "Ye (a) Description of liability			
(2) (3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, col (B) art X Other Liabilities. Complete if the organization answered "Ye (a) Description of liability (1) Federal income taxes		line 11e or 11f See Form 990	
(2) (3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, col (B) art X Other Liabilities. Complete if the organization answered "Ye (a) Description of liability (1) Federal income taxes (2)		line 11e or 11f See Form 990	
(2) (3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, col (B) art X Other Liabilities. Complete if the organization answered "Ye (a) Description of liability (1) Federal income taxes (2) (3)		line 11e or 11f See Form 990	
(2) (3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, col (B) (art X Other Liabilities. Complete if the organization answered "Ye (a) Description of liability (1) Federal income taxes (2) (3) (4)		line 11e or 11f See Form 990	
(2) (3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. Complete if the organization answered "Ye (a) Description of liability (1) Federal income taxes (2) (3) (4) (5)		line 11e or 11f See Form 990	
(2) (3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. Complete if the organization answered "Ye (a) Description of liability (1) Federal income taxes (2) (3) (4)		line 11e or 11f See Form 990	
(2) (3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, col (B) art X Other Liabilities. Complete if the organization answered "Ye (a) Description of liability (1) Federal income taxes (2) (3) (4) (5)		line 11e or 11f See Form 990	
(2) (3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, col (B) eart X Other Liabilities. Complete if the organization answered "Ye (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6)		line 11e or 11f See Form 990 (b) Book value	
(2) (3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, col (B) art X Other Liabilities. Complete if the organization answered "Ye (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7)		line 11e or 11f See Form 990 (b) Book value	

Sche	dule D (Form 990) 2018 Illinois FFA Alumni Association		23-7215345	Page 4
Pai	t XI Reconciliation of Revenue per Audited Financial State	ments With Revenu	e per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 1	2a	·	
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains (losses) on investments	. 2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants .	2c		
d	Other (Describe in Part XIII)	2d		
е	Add lines 2a through 2d .		2e	_
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
C	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	
Pa	t XII Reconciliation of Expenses per Audited Financial State	ements With Expens	ses per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 1	2a		
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1 1		
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses .	2c		
d	Other (Describe in Part XIII)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1.	1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	·			
þ	Other (Describe in Part XIII)	4b		
С	Add lines 4a and 4b	_ 4b	4c	
c 5	, , , , , , , , , , , , , , , , , , , ,	_ 4b	4c 5	
5 Pa	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	Part IV, lines 1b and 2b, Pa	5	rt XI,
5 Pa	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) rt XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, F	Part IV, lines 1b and 2b, Pa	5	rt XI,
5 Pa	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) rt XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, F	Part IV, lines 1b and 2b, Pa	5	rt XI,
5 Pa	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) rt XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, F	Part IV, lines 1b and 2b, Pa	5	rt XI,
5 Pa	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) rt XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, F	Part IV, lines 1b and 2b, Pa	5	rt XI,
5 Pa	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) rt XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, F	Part IV, lines 1b and 2b, Pa	5	rt XI,
5 Pa	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) rt XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, F	Part IV, lines 1b and 2b, Pa	5	rt XI,
5 Pa	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) rt XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, F	Part IV, lines 1b and 2b, Pa	5	rt XI,
5 Pa	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) rt XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, F	Part IV, lines 1b and 2b, Pa	5	rt XI,
5 Pa	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) rt XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, F	Part IV, lines 1b and 2b, Pa	5	rt XI,
5 Pa	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) rt XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, F	Part IV, lines 1b and 2b, Pa	5	rt XI,
5 Pa	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) rt XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, F	Part IV, lines 1b and 2b, Pa	5	rt XI,
5 Pa	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) rt XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, F	Part IV, lines 1b and 2b, Pa	5	rt XI,
5 Pa	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) rt XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, F	Part IV, lines 1b and 2b, Pa	5	rt XI,

832054 10-29-18

Schedule D (Form 990) 2018

SCHEDULE G

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Schedule G (Form 990 or 990-EZ) 2018

ame or the organization	A Alumni Assoc	iation					23-7215345	nuncation number
Part I Fundraising Activities.			ered "Y	es" oı	n Form 9	90, Part IV,		filers are not
required to complete this part								
1 Indicate whether the organization rais	ed funds through a							
a Mail solicitations				-		ent grants		
b Internet and email solicitations c Phone solicitations					nment g	rants		
d In-person solicitations		g L Special	Turiura	lisii iy i	eventa			
2 a Did the organization have a written o	or oral agreement wi	th any individua	l (ınclud	ding o	fficers, c	lirectors, tru	stees, or	
key employees listed in Form 990, Pa	art VII) or entity in c	onnection with p	rofess	ional f	undraisi	ng services?	Yes	☐ No
b If "Yes," list the 10 highest paid indiv	•	undraisers) pursi	uant to	agree	ements u	inder which	the fundraiser is to b	е
compensated at least \$5,000 by the	organization						<u> </u>	
(i) Name and address of individual or entity (fundraiser)	(ii) Act	ıvıty	(tii) funda have c or con contrib	trol of		ess receipts activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
			Yes	No				
	i;	3 Lift *	? '		٠,؋	r.t		
		······································	3		F.,	,		
						·		
			 					
		· · · · · · · · · · · · · · · · · · ·	1			<u> </u>		
		1 .		-				
		·	-					
				,		<u>.</u>		
		,						
						~ 		
otal				•				
3 List all states in which the organizatio or licensing	n is registered or lic	ensed to solicit	contrib	ution	s or has	been notifie	d it is exempt from re	egistration
	-	-						
	ř	•						
-								
		 .						
					!			

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

		le G (Form 990 or 990-EZ) 2018 Illineis F				215345 Page 2
Pé	art I	٠- ١				
	_	of fundraising event contributions and gr				is greater than \$5,000
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
						(add col (a) through
			Auction		11_	col (c))
Φ			(event type)	(event type)	(total number)	
en						
Revenue	1	Gross receipts	35,365.			35,365 <u>.</u>
	2	Less Contributions				
				,		
	3	Gross income (line 1 minus line 2)	35,365.			35 365.
	4	Cash prizes				
	5	Noncash prizes				
es						
eus	6	Rent/facility costs				
Direct Expenses						
ţ	7	Food and beverages				
<u>D</u> re		· ·				
	8	Entertainment				
	9	Other direct expenses	7,724.			7,724,
	10	Direct expense summary Add lines 4 throug			>	7.724.
	11					27,641,
Pa	irt l			n 990, Part IV, line 19, o	or reported more than	
	•	\$15,000 on Form 990-EZ, line 6a	7. 7	,	, , ,	
				(b) Pull tabs/instant		(d) Total gaming (add
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col (a) through col (c))
š						
ď	1	Gross revenue			34,296.	34,296,
	Ė	GIOSS TOVOTAGE			34,250,	34,230,
	2	Cash prizes				
ses	_	Oddii piized				
Expenses	3	Noncash prizes				
Ä	3	Noncash prizes				
ect		Pont/facility costs				
Dire	4	Rent/facility costs				
	_	Other direct evenence			06.455	06.455
	5	Other direct expenses		No.	26,455.	26,455.
		Valuators labor	Yes%			
	٥	Volunteer labor	∟ No	No No	No	
	_	Direct comments of the control of th	h E a a l /-/\			26.455
	7	Direct expense summary Add lines 2 throug	n o in column (a)		•	26,455.
	_	Not compare to the control of the co	7 fan an Ivan 41 (**		.	
	8	Net gaming income summary Subtract line 7	Trom line 1, column (d)		<u>P</u> _	7 841.
_	_	Annahina nahadadada ina di sebiati na		_		
		ter the state(s) in which the organization cond	_		-	
		the organization licensed to conduct gaming a		states?		X Yes No
t) If "	No," explain				
		ere any of the organization's gaming licenses r		-	ax year?	└── Yes └x No
t) If "	Yes," explain			-1	
	_					_
					_	
		0.03.10			Sahadula C /Fa	rm 990 or 990-F7\ 2018

<u>Sc</u> l	hedule G (Form 990 or 990 EZ) 2018 Illinois FFA Alumni Association 2	3-7215345	Page 3
	Does the organization conduct gaming activities with nonmembers?	Yes	x No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	x No
13	Indicate the percentage of gaming activity conducted in		
á	a The organization's facility	13a	%
ŧ	b An outside facility	13b	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records	š	
	Name		
	Address >		
15	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	x No
i	b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the amoun	nt	
	of gaming revenue retained by the third party > \$		
(c If "Yes," enter name and address of the third party		
	Name		
	Address >		
16	Gaming manager information		
	Name ▶		
	N.E.		
	Gaming manager compensation \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
	'		
17	Mandatory distributions		
•	a is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	Yes	Lx_I No
١	b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	the	
P	organization's own exempt activities during the tax year \$\sim \\$ \$\supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), a	and Part III. lines 9	9h 10h
•••	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions	ind rait in, inles 5	, 55, 165,
	100, 100, 10, and 17 b, as applicable 7100 provide any additional information 200 metractions		
_			
_			

Schedule (G (Form 990 or 990 EZ) Illinois FFA Alumni Association Supplemental Information (continued)	23-7215345	Page 4
Part IV	Supplemental Information (continued)		
•			
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SCHEDULEI (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" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

Open to Public

Inspection

OMB No 1545-0047

► Go to www.irs.gov/Form990 for the latest information.

Name of the organization							Employer identification number
Part General Information on Grants and Assistance	lumni Associa nd Assistance	tion					23-7215345
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	o substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or ass	istance, and the select	uoı
criteria used to award the grants or assistance?	tance?						X Yes No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	cedures for monit	oring the use of grant	funds in the Unite	d States			
Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	Jomestic Organi	zations and Domesti	c Governments. C	omplete if the orga	anization answered "Y	'es" on Form 990, Part	IV, line 21, for any
recipient that received more than \$5,000 Part II can be duplicated if additional space is needed	5,000 Part II can	be duplicated if addit	ional space is need	led			
1 (a) Name and address of organization or government	(a) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
Illinois Association of Future							
- 3221							
Northileta Drive - Springileta, 16 62702	37-6043957		16,800.	0			Scholarships
	nd government or	ganizations listed in th	ed in the line 1 table				
3 Enter total number of other organizations listed in the line 1 table	see the Instruct	i table					Schedule I (Form 990) (2018)
							(a) a=) (acc

Page 2 (f) Description of noncash assistance 23-7215345 (book, FMV, appraisal, other) Part IV | Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed. (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients Illinois FFA Alumni Association (a) Type of grant or assistance Schedule I (Form 990) (2018) Part III

Schedule I (Form 990) (2018)

832102 11-02-18

SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ) Department of the Treasury

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.

Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

Open to Public Inspection

Name of the organization	Employer identification number
Illinois FFA Alumni Association	23-7215345
Form 990, Part VI, Section A, line 6:	
The organization has two classes of members, voting and non-voting, Only	
voting members can hold office	
Form 990, Part VI, Section A, line 7a:	
Members have the authority to elect or appoint members of the governing	
body	
Form 990, Part VI, Section A, line 7b:	
Various governing decisions of the organization are subject to approval by	
$^{\prime\prime}$, $^{\prime\prime}$	
the members	
Form 990, Part VI, Section B, line 10b:	
Each affiliate has their own set of bylaws and govern their own activities	
and purpose	
Form 990, Part VI, Section B, line 11b:	
Return will be reviewed by the board prior to filing	
Form 990 Part VI Section C, Line 18:	
Total 990, Tale VI, Bección C, Bine IV.	-
Available upon request	
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Form 990, Part VI, Section C, Line 19:	
Governing documents and financial statements are on file at the office and	- <u></u>
are available by request	