**Return of Organization Exempt From Income Tax** Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public. 906

■ Do not enter social security numbers on this form as it may be made public.

Open to Public

			f the Treasury	1	not enter social se to to www.ir <u>s.gov</u> /					17	06	Open to Public Inspection
				lar year, or tax ye		JL 1, 2018				N 30, 2019		<u> </u>
		heck if		f organization					Ť	D Employer ide	ntificati	on number
	a	pplicable	в	_	Futuure Farme	rs						
	Г	Addres	ss									
	$\vdash$	Name		usiness as						37-	603208	1
	F	Initial		_	. box if mail is not del	vered to stree	et address)	. Room/s	suite	E Telephone nur		
	F	Final return/		Northfield Dri			,			•	-753-3	328
		termin			ince, country, and	ZIP or foreig	in postal code	<del></del>		G Gross receipts \$		671,657.
	Γ	Amend	tert i	field IL 62	•		, ,		- 1	H(a) is this a grou	ıp retur	
	F	Applic			ncipal officer Melir	ıda Bunsel	lmever			for subordin		Yes X No
		pendir	ng	C above				<b>∧</b> 1	マー	H(b) Are all subordina		
	11	ax-exe		x 501(c)(3)	501(c)(	◀ (insert no	o.) 4947(a	a)(1) or	527	• •		(see instructions)
			t <b>e:</b> ▶ ilaged		= (-/ (		,	1		H(c) Group exem		
			organization:		Trust As	sociation	Other >	L		f formation: 1929		ate of legal domicile; IL
8		rt I	Summary		<del></del>							
KK		T	Briefly describ	oe the organization	n's mission or most	significant a	activities' The	objective	ves a	and purposes o	f	
0	Governance	1	-		FFA, Inc. are							
65	rna	l	Check this bo		organization discoi			•		than 25% of its ne	et asset	s.
S	ove.	3	Number of vo	ting members of t	he governing body	(Part VI, line	1a)				3	12
=		4	Number of inc	dependent voting	members of the go	verning bod	y (Part VI, line	1b)			4	12
0	80	5	Total number	of individuals emp	oloyed in calendar y	ear 2018 (P	art V, line 2a)				5	0
Щ	Activities &	6	Total number	of volunteers (est	mate if necessary)						6	50
Ź	Ę	7 a	Total unrelate	ed business revenu	e from Part VIII, co	olumn (C), lin	e 12				7a	0.
₹	⋖	b	Net unrelated	business taxable	income from Form	990-1, line 3	8				7b	0.
SCANNED										Prior Year		Current Year
	Ð	8	Contributions	and grants (Part	VIII, line 1h)					634,3	71.	612,344,
	ž	9	Program serv	ice revenue (Part \	/III, line 2g)					23,6	62.	36,919.
	Revenue	10	Investment in	ncome (Part VIII, co	olumn (A), lines 3, 4	, and 7d)				33,4	16.	22,394.
	<u> </u>	11								0.	0.	
		12	Total revenue	- add lines 8 thro	ugh 11 (must equal	Part VIII, co	lumn (A), line	12)		691,4	49	671,657.
		13	Grants and si	ımılar amounts pai	d (Part IX, column (	A), lines 1-3)	1			428,2	47.	531,646.
		14	Benefits paid	to or for members	(Part IX, column (A	A), line 4)					0.	0.
	S	15	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)						0.			
	Expenses	16a	Professional f	fundraising fees (P	art IX, column (A), l	ine 11e)			<u> </u>		0.	0.
	ă	b	Total fundrais	sing expenses (Pai	t IX, column (D), lın	e 25)		13,344.				
	ш	17	Other expens	es (Part IX, colum	n (A), lines 11a-11d	, 11f-24e)	<u> </u>			239,6	90.	95,300.
		18	Total expense	es Add lines 13-17	n (A), lines 11a-11d 7 (must equal Part I act line 18 from line	X, column (7	A), line 25)	FIVER	7	667.9	37.	626,946,
			Revenue less	expenses Subtra	ct line 18 from line	12		LIVLL		23,5	12.	44,711,
	Net Assets or Fund Balances	1				ľ	1441	1 4 2020	Beg	inning of Current Y	ear	End of Year_
	Sset	20	,	Part X, line 16)		1	% JAN	<b>1 4</b> 2020			60.	1,620,671,
	et A	21	1	s (Part X, line 26)		}	<u></u>			= 1	0.	
					ubtract line 21 from	line 20 L	<del>CCD</del>	EN. UT	<u> </u>	1,575,9	60.	1,620,671.
	$\overline{}$		Signatur							<del></del>	<del></del>	
		_									or my kn	owledge and belief, it is
	true	, correc	it, and complete	Deciaration of prep	earer (other than office	er) is based of	1 all information	of which pre	parer	nas any knowledge.	12/2	070
		_	Signatur	re of officer	Dunse	may	<u></u>	<del></del>		Date	7/2	020
		n . :								Date	•	
	Her	e []		da Bunselmeyer print name and title	, Executive Se	cretary						
		<u> </u>		·		D			Τn	ate Chec	,	PTIN
		0	Print/Type pre	•		Preparer's s	· / M	11-		-9-2020 self-e	`	1
	Paid	Salet 1		urphy CPA		1 Tolke	2/1./2	4~~				P00135697
		~	1	•	ssociates CPAs			<del></del>		Firm's EIN	2	7-4404526
	use	Jse Only Firm's address 2501 Chatham Rd, Ste 120					DL					
	N 4 -	, the !!	DC dissues #		d IL 62704		······································			Phone no.	(217)	544-2120
	ivia,	<u>, uie 11</u>	าว นาวบนจร เก	io recontri with the	<u>oreparer shown abo</u>	ve . Isee ins	uuuluis)					X Yes No

Form 990 (2018)

832001 12-31-18 LHA For Paperwork Reduction Act Notice, see the separate instructions. See Schedule O for Organization Mission Statement Continuation

	1990 (2018) of America	37-6032081	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		<u> </u>
1	Briefly describe the organization's mission		
	The objectives and purposes of the Illimois Foundation FFA Inc. are to	<del></del>	
	receive, maintain, and hold by request, devise, gift, or otherwise, either absolute or in trust for any of its purposes any property, real	<del></del>	
	or personal, fund or no fund without limitation as to amount or value		
2	Did the organization undertake any significant program services during the year which were not listed on the		<u>_</u>
_	prior Form 990 or 990-EZ?	□v <sub>o</sub>	s 🗓 No
	If "Yes," describe these new services on Schedule O		3 [40]
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	□Ye	s x No
-	If "Yes," describe these changes on Schedule O		الما 3
4	Describe the organization's program service accomplishments for each of its three largest program services, as	measured by expens	es
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other		
	revenue, if any, for each program service reported	•	•
4a	(Code) (Expenses \$	ue \$	0,)
	Awards and plaques for recognition of High School vocational		
	agricultural students for achievements, student officer expenses for		
	travel to conduct training schools, chapter visits, and State office		
	leadership meetings for over 19,000 members.		
			<del></del> -
		<del>-</del>	
4b	(Code) (Expenses \$	ue \$	0,)
	Support to FFA related organizations including Illinois Association		
	Future Farmers of America, Illinois Association of Vocational Agriculture Teachers, and others.		
	(Public relations)	<del></del> -	<del></del>
	(runite feracions)		
		<del></del>	
		<del>.</del>	<del></del>
4c	(Code) (Expenses \$ 18,454. including grants of \$ 18,454. ) (Revenue	ue \$	0.)
	Scholarships to FFA members. Support to first year agriculture high		
	school teachers.		
	-1		
		·	
4d	Other program services (Describe in Schedule O)		
_	(Expenses \$ including grants of \$ ) (Revenue \$	)	
<u>4e</u>	Total program service expenses ► 541,390,		

## Form 990 (2018) of America 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	х	
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_		х
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_		х
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	х	
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		<u> </u>
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		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			
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>
С	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>
u	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	444		
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d		<u> </u>
f		<u>11e</u>		_ <u>x</u>
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	124	Λ	
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
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,		-	
	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		x
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		<u> </u>
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
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		<u> </u>
	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			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	x	

	990 (2018) of America 37-603	32081	F	age 4
Pa	rt IV Checklist of Required Schedules (continued)			
	•	<del></del>	Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
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	e		
	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 25a	24a	ļ	X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	-	<b>├</b>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c	1	
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	-	₩
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) 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	-	X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			ŀ
	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	-	х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"		1	
	complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial		1	
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member		1	1
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
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	<u> </u>	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
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an office			
	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	<del> </del>	X
31	Did the organization liquidate, terminate, or dissolve and cease operations?		ľ	
	If "Yes," complete Schedule N, Part I	31	<del> </del>	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
00	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
24	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	<del>  -</del>	X
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			
25.0		34	<u> </u>	X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
Ь	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
26	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			
37	If "Yes," complete Schedule R, Part V, line 2	36_		X
31	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
38	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	37_		X
30				
Pai	Note. All Form 990 filers are required to complete Schedule O rt V Statements Regarding Other IRS Filings and Tax Compliance	38	<u>X</u>	
	Check if Schedule O contains a response or note to any line in this Part V			
	, was as any man, and t	<u> </u>	V	<del>                                     </del>
1-	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		Yes	No
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b.	υį	1	1

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

(gambling) winnings to prize winners?

Form 990 (2018) 37-6032081 Page 5 of America Part V Statements Regarding Other IRS Filings and Tax Compliance (continued) 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? 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 **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) Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b 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 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? 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 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 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 b Did the sponsoring 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 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter Gross income from members or shareholders а 11a 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 Did the organization receive any payments for indoor tanning services during the tax year? 14a b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14h Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or

15

excess parachute payment(s) during the year?

If "Yes," complete Form 4720, Schedule O

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?

Illinois Foundation Futuure Farmers Form 990 (2018) 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 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. Enter the number of voting members included in line 1a, above, who are independent 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? Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors, or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 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? Яa Each committee with authority to act on behalf of the governing body? 8h х 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 Did the organization have local chapters, branches, or affiliates? 10a 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 x Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b 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 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? The organization's CEO, Executive Director, or top management official 15a 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 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

Se	ction	C	Disc	losure	

exempt status with respect to such arrangements?

17	List the states with which a copy of this Form 990 is required to be filed ▶ <sub>IL</sub>
18	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 Other (explain in Schedule O)
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial
	statements available to the public during the tax year
20	State the name, address, and telephone number of the person who possesses the organization's books and records
	The Organization - 217-753-3328
	3221 Northfield Drive Springfield IL 62702

16b

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of America

37-6032081

⊃age **7** 

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

Check if Schedule O contains a response or note to any line 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

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

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	Position (do not check more than on box, unless person is both a officer and a director/truste				than	one 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	Кеу етріоуее	Highest compensated employee	<b>Рогте</b> г	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Harley Hepner	0.10									
President	-	х		Х	-	<u> </u>		0.	0.	0.
(2) Richard DeSchepper	0.10									
Vice-President		Х		Х		<b> </b>		0.	0.	0.
(3) Joseph Birrittie	0.10	İ		ļ						
IL. FFA President		Х	_	Х				0,	0.	0.
(4) Ryan Orrick	0,10									
IACCAI Representative		Х	-	$\vdash$	_			0.	0.	0.
(5) Nick James	0.10			l						
IAVAT President		Х		<u> </u>			_	0.	0.	0.
(6) John Heiser	0.10									
IAVAT Vice-President		Х			_		_	0.	0.	0.
(7) Gary Ochs	0.10									
IAVAT Treasurer		Х					<u> </u>	0.	0.	0.
(8) Joe Webel	0.10									
Past Chair, Sponsoring Com	·-	Х			ļ	<b> </b>		0.	0,	0.
(9) Jim McCray	0.10				ŀ					
Immediate Past Chair Sponsoring Comm		Х		ļ				0.	0.	0.
(10) Stan Toepher	0.10	1								
Director-District I		Х		<u> </u>	<u> </u>		ļ	0.	0.	0.
(11) Allen Dietz	0.10									
Director-District II		Х				_		0.	0.	0.
(12) Alan Merrimam	0.10									
Director-District III		Х				_		0.	0.	0.
(13) Josh St. Peters	0.10									
Director-District IV		Х						0.	0.	0.
(14) Melinda Bunselmeyer	1.00				ŀ					
Executive Secretary				х				67,965.	0.	0.
					_					

\$100,000 of compensation from the organization

Page 9

Form 990 (2018)

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D)
Revenue excluded from tax under sections
512 - 514 (B) (C) Related or Unrelated Total revenue exempt function business revenue revenue Federated campaigns ٦а **b** Membership dues 1b Fundraising events 1c 1d d Related organizations e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f 612,344 Noncash contributions included in lines 1a-1f \$ Total. Add lines 1a-1f Business Code Program Service 2 a Miscellaneous 900099 36,600 36,600 900099 **b** Planned giving 319 319 f All other program service revenue g Total, Add lines 2a-2f 36,919 3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (II) Personal 6 a Gross rents Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other assets other than inventory b Less cost or other basis and sales expenses Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c) See Part IV, line 18 а **b** Less direct expenses c Net income or (loss) from fundraising events 9 a Cross income from garning activities. See - -Part IV, line 19 а **b** Less direct expenses b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances а b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a d All other revenue e Total. Add lines 11a-11d

671,657

59,313

Total revenue See instructions

## Form 990 (2018) of America 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)

	Check if Schedule O contains a response or note to any line in this Part IX						
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses		
1	Grants and other assistance to domestic organizations		,				
	and domestic governments. See Part IV, line 21	513,192.	513,192.				
2	Grants and other assistance to domestic						
	individuals See Part IV, line 22	18,454.	18,454.				
3	Grants and other assistance to foreign		-				
	organizations, foreign governments, and foreign						
	individuals 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 accruals and contributions (include			-			
	section 401(k) and 403(b) employer contributions)		_				
9	Other employee benefits						
10	Payroll taxes						
11	Fees for services (non-employees)		-				
а	Management						
b	Legal ·	-					
С	Accounting	7,125.		7,125.			
d	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.)	7,118.		7,118.			
12	Advertising and promotion	6,184.			6,184.		
13	Office expenses						
14	Information technology	7,160.			7,160.		
15	Royalties						
16	Occupancy	19,197.		19,197.			
17	Travel						
18	Payments of travel or entertainment expenses						
	for any federal, state, or local public officials						
19	Conferences, conventions, and meetings						
20	Interest						
21	Payments to affiliates	•					
22	Depreciation, depletion, and amortization	19,581.		19,581.			
23	Insurance	10,405.	•	10,405.			
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) amount, list line 24e expenses on Schedule O.)						
а	Miscellaneous	8,786.		8,786.			
b	STAR-NAAE	5,694.	5,694.				
c	Awards and plaques	2,500.	2,500.				
d	Planned giving	1,550.	1,550.				
е	All other expenses						
<u>25</u>	Total functional expenses Add lines 1 through 24e	626,946.	541,390.	72,212.	13,344.		
26	Joint costs. Complete this line only if the organization				- <del></del>		
	reported in column (B) joint costs from a combined						
	educational campaign and fundraising solicitation						
	Check here if following SOP 98-2 (ASC 958-720)						
832010	12-31-18				Form <b>990</b> (2018)		

Form 990 (2018) of America <u>Page</u> **11** Part X **Balance Sheet** 'Check if Schedule O contains a response or note to any line in this Part X (B) Beginning of year End of year Cash - non-interest-bearing 1 79,774 1 60,036. 2 Savings and temporary cash investments 985,261 2 1,069,290. 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 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 employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr) Complete Part II of Sch L 6 Notes and loans receivable, net 7 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 9 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 967,065 b Less accumulated depreciation 10b 475,720 491\_345. 510,925 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) 16 1,620,671 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 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 23 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 Total liabilities. Add lines 17 through 25 ٥ 26 Organizations that follow SFAS 117 (ASC 958), check here \ x and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 27 Unrestricted net assets 1,278,542, 27 1,309,484. Temporarily restricted net assets 28 237,418 28 311,187. Permanently restricted net assets 29 60,000 0. Organizations that do not follow SFAS 117 (ASC 958), check here ▶

> 1,620,671. Form **990** (2018)

1,620,671.

30

31

32

33

34

1,575,960

1,575,960

30

31

32

33

and complete lines 30 through 34.

Total net assets or fund balances

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Paid-in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds

2c

3a

Form 990 (2018)

review, or compilation of its financial statements and selection of an independent accountant?

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

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

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

Act and OMB Circular A-133?

#### **SCHEDULE A**

Internal Revenue Service

(Form 990 or 990-EZ)

Name of the organization

Department of the Treasury

### **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Illinois Foundation Futuure Farmers 37-6032081 Part I Reason for Public Charity Status (All organizations must complete this part ) See instructions The organization is not a private foundation because it is (For lines 1 through 12, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 8 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2), (Complete Part III ) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3), Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) is the organization listed (i) Name of supported (n) EIN (III) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions)) Total

Schedule A (Form 990 or 990 EZ) 2018 of America

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

. (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 618,814 635.359 616.949 658.033 2,529,155. 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total, Add lines 1 through 3 618,814 635,359 616.949 658,033 2,529,155. 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11. column (f) 6 Public support. Subtract line 5 from line 2,529,155 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2014 (b) 2015 (c) 2016(d) 2017 (e) 2018 (f) Total 7 Amounts from line 4 2,529,155. 618,814 635,359 616,949 658,033 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 33,416 20.648 16,235 23.827 94,126. 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) 11 Total support. Add lines 7 through 10 2,623,281, 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f) 14 96.41 15 Public support percentage from 2017 Schedule A, Part II, line 14 15 % 96.28 16a 33 1/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization **▶** x b 33 1/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization

meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b 10% -facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2018

Schedule A (Form 990 or 990-EZ) 2018 of America Page 3 37-6032081 Part III | Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2014 **(b)** 2015 (c) 2016(d) 2017 (e) 2018 (f)/Total 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b 8 Public support. (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning in) (c) 2016 (a) 2014 (b) 2015 (d) 2017 (e) 2018 (f) Total 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b. whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) 13 Total support (Add lines 9, 10c, 11, and 12) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2018 (line 8, column/(f), divided by line 13, column (f)) 15 % 16 Public support percentage from 2017 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2018 (line 1/0c, column (f), divided by line 13, column (f)) % 17 18 Investment income percentage from 2017 Schedule A, Part III, line 17 18 % 19a 33 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

#### Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V)

#### Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
   Did the organization have any supported organization that does not have an IRS determination of status.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
  - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

		T.,	T
		Yes	No
	1		
	'		<del>                                     </del>
	2		
	_3a		<u> </u>
	3b		<del>  -</del>
	3с		
	4a		
			}
	4b		
	4-		
	4c		
	_5a		
	5b		<u> </u>
	5c		
	6		
	7		
	8		
	9a		
	_9b		
	9c		
	40-		
	10a		
	10b		
_			

Sche	edule A (Form, 990 or 990-EZ) 2018 of America			37-6032081	Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	g Orgai	nizations		
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust on	Nov 20, 1970 (explain	ın Part VI) See ins	tructions. Al
	other Type III non-functionally integrated supporting organizations must co	mplete Se	ections A through E		
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Curre (optio	
1	Net short-term capital gain	1			
2	Recoveries of prior-year distributions	2			
3	Other gross income (see instructions)	3	_		
4	Add lines 1 through 3	4			
5_	Depreciation and depletion	5			
6	Portion of operating expenses paid or incurred for production or				
	collection of gross income or for management, conservation, or				•
	maintenance of property held for production of income (see instructions)	6			
7	Other expenses (see instructions)	7			
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8			
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Currei (optio	
1	Aggregate fair market value of all non-exempt-use assets (see	ľ			
	instructions for short tax year or assets held for part of year)				
а	Average monthly value of securities	1a			
b	Average monthly cash balances	1b	<del></del>		
С	Fair market value of other non-exempt-use assets	1c			
d	Total (add lines 1a, 1b, and 1c)	1d			
е	Discount claimed for blockage or other				
	factors (explain in detail in Part VI)				
2	Acquisition indebtedness applicable to non-exempt-use assets	2			
3	Subtract line 2 from line 1d	3	<del>-</del> .		_
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,				
	see instructions)	4			
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6	Multiply line 5 by 035	6			_
7	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
Sect	ion C - Distributable Amount			Current	Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1			
2	Enter 85% of line 1	2			
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3			
4	Enter greater of line 2 or line 3	4			
5	Income tax imposed in prior year	5			
6	Distributable Amount. Subtract line 5 from line 4, unless subject to				
	emergency temporary reduction (see instructions)	6			
7	Check here if the current year is the organization's first as a non-functional	ly integrate	ed Type III supporting	organization (see	

Schedule A (Form 990 or 990-EZ) 2018

instructions)

Schedule A (Form 990 or 990-EZ) 2018

a Excess from 2014
 b Excess from 2015
 c Excess from 2016
 d Excess from 2017
 e Excess from 2018

#### ' Illinois Foundation Futuure Farmers Schedule A (Form 990 or 990-EZ) 2018 of America

Don't M	(Point 990 01 990 E27 2018 01 America 37-6032081 Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1, Part V, Section B, line 1e, Part V,
	Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information (See instructions.)
	•
	-Ai
•	
	<b>↓</b> •

#### 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 Open to Public Inspection

Name of the organization

Illinois Foundation Futuure Farmers

Employer identification number

Pa	Part I 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			
1	Total number at end of year					
2	Aggregate value of contributions to (during year)		14,900.			
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year		10,000.			
5	Aggregate value at end of year 271,187  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?					
6	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					
Ü	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring					
	impermissible private benefit?	or donor advisor, or for any other purpose of	x Yes No			
Pa	rt II Conservation Easements. Complete if the org	nanization answered "Ves" on Form 990. P				
1	Purpose(s) of conservation easements held by the organizat	· · · · · · · · · · · · · · · · · · ·	art iv, mie /			
•	Preservation of land for public use (e.g., recreation or e	` — ` ' ''	rically important land area			
	Protection of natural habitat	· <del></del>	rically important land area			
	Protection of natural habitat  Preservation of a certified historic structure  Preservation of open space					
2						
_	day of the tax year	ned conservation contribution in the form of	[""" ]			
	Total number of conservation easements	,	Held at the End of the Tax Year			
b	Total acreage restricted by conservation easements		2a			
	Number of conservation easements on a certified historic str	ructure included in (a)	2b			
d		2c				
u	Number of conservation easements included in (c) acquired listed in the National Register					
3						
3						
4	Number of states where property subject to consequence occupant is leasted.					
5						
ŭ	g					
6	violations, and enforcement of the conservation easements it holds?  Yes No					
Ū	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year					
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year					
•	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  \$\Bar{\text{\$\sigma}\$}\$\$\$					
8						
_	and section 170(h)(4)(B)(ii)?	to causely the requirements or acciton thete	Yes No			
9						
	include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for					
	conservation easements					
Pa	Part III 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 (AS	SC 958), not to report in its revenue statem	ent 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						
	treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amount					
	relating to these items					
	(i) Revenue included on Form 990, Part VIII, line 1		<b>▶</b> \$			
	(ii) Assets included in Form 990, Part X		<b>S</b>			
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financial	gain, provide			
_	the following amounts required to be reported under SFAS 1		ga, provido			
a	Revenue included on Form 990. Part VIII. line 1	v oog rouning to those items	<b>▶</b> \$			

b Assets included in Form 990, Part X

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10c.)

Schedule D (Form 990) 2018

		Illinois Foundation Futuure Farmer	cs		
	edule D (Form 990) 2018	of America		37-6032081	Page 4
Pai		of Revenue per Audited Financial St inization answered "Yes" on Form 990, Part IV, I		ue per Heturn.	
			ille 12a		
1	· · · · · · · · · · · · · · · · · · ·	ther support per audited financial statements		1	671,657
2		but not on Form 990, Part VIII, line 12			
	Net unrealized gains (losse	•	2a		
þ		•	2b		
	Recoveries of prior year gra		2c	<del></del>	
	Other (Describe in Part XIII	)	2d	<del></del>	
	Add lines 2a through 2d	•			0
3	Subtract line 2e from line 1	•		3	671,657
4		990, Part VIII, line 12, but not on line 1	1 1		
а	·	ncluded on Form 990, Part VIII, line 7b	_4a		
b	Other (Describe in Part XIII	)	4b		
С	Add lines 4a and 4b			4c	0
5		and <b>4c.</b> (This must equal Form 990, Part I, line 12		. 5	671,657
Pa	rt XII Reconciliation	of Expenses per Audited Financial S	tatements With Exper	ises per Return.	
	Complete if the orga	inization answered "Yes" on Form 990, Part IV, I	ine 12a		
1	Total expenses and losses	per audited financial statements	•	1	626,946
2	Amounts included on line 1	but not on Form 990, Part IX, line 25			
а	Donated services and use	of facilities	2a		
b	Prior year adjustments		2b		
C	Other losses		2c	·	
d	Other (Describe in Part XIII	)	2d		
е	Add lines 2a through 2d	•		2e	0.
3	Subtract line 2e from line 1	•		3	626.946
4		990, Part IX, line 25, but not on line 1	Ç		020,310,
		ncluded on Form 990, Part VIII, line 7b	4a		
	Other (Describe in Part XIII	,	4b		
	Add lines 4a and 4b		140	40	0
_		and 4c. (This must equal Form 990, Part I, line	10)	4c 5	
Pa	rt XIII Supplemental I				626_946
		for Part II, lines 3, 5, and 9; Part III, lines 1a and s 2d and 4b. Also complete this part to provide a		Part V, line 4, Part X, line 2	?, Part XI,
	<del></del>			<u></u>	
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		,			
		1			
			-	<u> </u>	
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**SCHEDULE 1** (Form 990)

and Other Accieta

SCAEDULE		Grants and Other Assistance to Organizations,	מאום ומאס-כילכו	
(Form 990)	 ©	Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.	2018	
Department o	Department of the Treasury	▶ Attach to Form 990.	Open to Public	
Internal Revenue Service	anue Service	► Go to www.irs.gov/Form990 for the latest information.	Inspection	
Name of t	the organization	Name of the organization Illinois Foundation Futuure Farmers	Employer identification number	
		of America	37-6032081	
Part I	General Infor	Part I General Information on Grants and Assistance		
1 Doe	s the organizativ	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		

**8** 

X Yes

criteria used to award the grants or assistance?

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	cedures for monit	oring the use of grant	funds in the United	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	Domestic Organia	zations and Domestic	Governments. Co	omplete if the orga	nization 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	55,000 Part II can	be duplicated if addition	onal space is need	ed	:		
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 noncash assistance	(h) Purpose of grant or assistance
Illinois Association of Future							Convention \$64,109
Farmers of America - 3221							Leadership Camp \$17,500
Northfield Dr - Springfield, IL						-	Confernce \$20,000
62702	37-6043957	501(c)(5)	359,592.	0			Section/District awards
Illinois Association of Vocational							Annual conference \$19,300
Agriculture Teachers - 3221							Plaques and awards \$7,355
Northfield Dr - Springfield, IL							Board of Directors \$9,640
62702	37-0918596	501(c)(6)	13,102.	0.			Beginning Advisor
Illinois FFA Alumni Association							
3221 Northfield Dr	-					•	•
Springfield, IL 62702	23-7215345	501(c)(5)	2,525.	0.			Annual meeting \$500
Illinois Post Secondary							
Agriculture Student Organization -							
3221 Northfield Dr - Springfield,							Annual conference \$2,475
IL 62702	26-3456918	501(c)(3)	5,650,	0			Fall conference \$900
							Building and grounds
IAVAT Administrative Fund							000'08\$
3221 Northfield Dr						_	Foundation staff \$56,000
Springfield, IL 62702	37-0918596	501(c)(6)	132,323.	0.			Other \$9,505
						;	
2 Enter total number of section 501(c)(3) and government organizations	nd government orç	janizations listed in the	listed in the line 1 table				•

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 3 Enter total number of other organizations listed in the line 1 table

See Part IV for Column (h) descriptions

Schedule I (Form 990) (2018)

Illinois Foundation Futuure Farmers Schedule I (Form 990) (2018) of America

Part III

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

Page 2

37-6032081

(f) Description of noncash assistance (e) Method of valuation (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 (d) Amount of non-cash assistance ٥. 10,000 8,100 (c) Amount of cash grant (b) Number of recipients (h) Purpose of Grant or Assistance: Convention \$64,109 Illinois Association of Future Farmers of America (a) Type of grant or assistance Name of Organization or Government: Section/District awards \$17,503 Part II, line 1, Column (h): National Convention \$10,000 First Year Teacher Project Leadership Camp \$17,500 Confernce \$20,000 Scholarships

Schedule I (Form 990) (2018)

Other \$50 749

832102 11-02-18

# Illinois Foundation Futuure Farmers Schedule I (Form 990) of America 37-6032081 Page 2 Part IV Supplemental Information Name of Organization or Government: Illinois Association of Vocational Agriculture Teachers (h) Purpose of Grant or Assistance: Annual conference \$19,300 Plaques and awards \$7,355 Board of Directors \$9,640 Beginning Advisor Workshop \$487 IAVAT CDEs \$1,550

#### 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.

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

P 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

2018

Open to Public Inspection

Name of the organization

Illinois Foundation Futuure Farmers
of America

Employer identification number 37-6032081

Form 990, Part I. Line 1. Description of Organization Mission: gift, or otherwise, either absolute or in trust for any of its purposes, any property, real or personal, fund or no fund, without limitation as to amount or value to convey such property and to invest or reinvest any principal, and to deal with and expand the income and/or principal of the Corporation for such education activities and in such a manner as in the judgement of the Board of Trustees will stimulate and promote the best interests of students and former students of agricultural education on a local sectional or State basis. Form 990 Part III Line 1 Description of Organization Mission: and to convey such property and to invest or reinvest any principal and to deal with and expend the income and/or principal of the Corporation for such education activities and in such a manner as in the jugement of the Board of Trustees will stimulate and promote the best interests of students and former students of agricultural education on a local sectional or State basis Form 990, Part VI, Section A, line 4: The Foundation revised its by-laws. A copy is attached. Form 990, Part VI, Section B, line 11b. Reviewed by Executive Secretary and Executive Treasurer before filing.

Schedule O (Form 990 or 9	990-EZ) (2018)	Page 2
Name of the organization	Illinois Foundation Futuure Farmers	Employer identification number
	of America	37-6032081
Available upon reque	st	
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