



See a Social Security Number? Say Something!  
Report Privacy Problems to <https://public.resource.org/privacy>  
Or call the IRS Identity Theft Hotline at 1-800-908-4490



**Short Form  
Return of Organization Exempt From Income Tax**

**2008**

Department of the Treasury  
Internal Revenue Service

**Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code  
(except black lung benefit trust or private foundation)**  
▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form.  
▶ The organization may have to use a copy of this return to satisfy state reporting requirements

**Open to Public Inspection**

**A For the 2008 calendar year, or tax year beginning** , 2008, **and ending** ,

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Please use IRS label or print or type. See Specific Instructions. AMERICAN CORN GROWERS ASSOCIATION P.O. BOX 18157 WASHINGTON, DC 20036	<b>D</b> Employer identification number 52-1513597
		<b>E</b> Telephone number (202) 835-0330
		<b>F</b> Group Exemption Number

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

**G** Accounting method  Cash  Accrual  
Other (specify) ▶

**I** Website: ▶ WWW.ACGA.ORG

**H** Check  if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

**J** Organization type (check only one) —  501(c) ( 6 ) (insert no) | 4947(a)(1) or | 527

**K** Check  if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

**L** Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$1,000,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ 210,118.

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See the instructions for Part I.)

REVENUE	1 Contributions, gifts, grants, and similar amounts received	1	158,119.
	2 Program service revenue including government fees and contracts	2	17,116.
	3 Membership dues and assessments	3	34,370.
	4 Investment income	4	513.
	5a Gross amount from sale of assets other than inventory	5a	
	b Less cost or other basis and sales expenses	5b	
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (alt sch)	5c	
	6 Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here <input type="checkbox"/>		
	a Gross revenue (not including \$ _____ of contributions reported on line 1)	6a	
b Less direct expenses other than fundraising expenses	6b		
c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c		
7a Gross sales of inventory, less returns and allowances	7a		
b Less cost of goods sold	7b		
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8 Other revenue (describe ▶ _____)	8		
9 <b>Total revenue</b> (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)	9	210,118.	
EXPENSES	10 Grants and similar amounts paid (attach schedule)	10	
	11 Benefits paid to or for members	11	
	12 Salaries, other compensation, and employee benefits	12	39,500.
	13 Professional fees and other payments to independent contractors	13	75,052.
	14 Occupancy, rent, utilities, and maintenance	14	3,500.
	15 Printing, publications, postage, and shipping	15	20,049.
	16 Other expenses (describe ▶ See Statement 1)	16	73,838.
	17 <b>Total expenses</b> (add lines 10 through 16)	17	211,939.
	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-1,821.
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year net assets or fund balances on prior year's return)	19	-47,115.
20 Other changes in net assets or fund balances (attach explanation)	20		
21 <b>Net assets or fund balances at end of year</b> Combine lines 18 through 20	21	-48,936.	

**Part II Balance Sheets.** If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II.)		(A) Beginning of year	(B) End of year
22 Cash, savings, and investments		9,901.	9,959.
23 Land and buildings			
24 Other assets (describe ▶ See Statement 2)			69.
25 <b>Total assets</b>		9,901.	10,028.
26 <b>Total liabilities</b> (describe ▶ See Statement 3)		57,016.	58,964.
27 <b>Net assets or fund balances</b> (line 27 of column (B) must agree with line 21)		-47,115.	-48,936.

SCANNED OCT 06 2009



**Part V Other Information** (Note the statement requirement in General Instruction V.)

		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity		X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If 'Yes,' attach a conformed copy of the changes		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T		
35a	a Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?		X
35b	b If 'Yes,' has it filed a tax return on Form 990-T for this year?		
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' complete applicable parts of Schedule N		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions	37a	0.
37b	b Did the organization file Form 1120-POL for this year?		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?		X
38b	b If 'Yes,' complete Schedule L, Part II and enter the total amount involved	38b	N/A
39	501(c)(7) organizations Enter		
39a	a Initiation fees and capital contributions included on line 9	39a	N/A
39b	b Gross receipts, included on line 9, for public use of club facilities	39b	N/A
40a	501(c)(3) organizations Enter amount of tax imposed on the organization during the year under: section 4911 ▶ N/A, section 4912 ▶ N/A, section 4955 ▶ N/A		
40b	b 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' complete Schedule L, Part I	40b	
40c	c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0.
40d	d Enter amount of tax on line 40c reimbursed by the organization		0.
40e	e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T	40e	X
41	List the states with which a copy of this return is filed ▶ None		

42a The books are in care of ▶ PAM HORWITZ Telephone no. ▶ (815) 646-4369  
 Located at ▶ 18345 1250 N. AVE. TISKILWA IL ZIP + 4 ▶ 61368

		Yes	No
42b	b 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)? If 'Yes,' enter the name of the foreign country ▶ _____		X
42c	c At any time during the calendar year, did the organization maintain an office outside of the U.S. ? If 'Yes,' enter the name of the foreign country. ▶ _____		X

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year ▶  N/A  
 ▶ 43 N/A

		Yes	No
44	Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ		X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' Form 990 must be completed instead of Form 990-EZ		X

**Part VI Section 501(c)(3) organizations only.** All section 501(c)(3) organizations must answer questions 46-49 and complete the tables for lines 50 and 51.

	Yes	No
46 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		
47 Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II		
48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E		
49a Did the organization make any transfers to an exempt non-charitable related organization?		
b If 'Yes,' was the related organization(s) a section 527 organization?		

50 Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

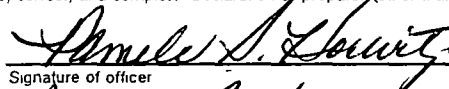
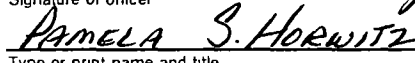
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
-----				
-----				
-----				
-----				
-----				
-----				
Total number of other employees paid over \$100,000				

51 Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

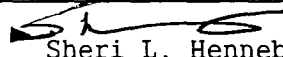
(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
-----		
-----		
-----		
-----		
-----		
Total number of other independent contractors receiving over \$100,000		

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

Sign Here


Date 9/4/09  
 Signature of officer  
  
 Type or print name and title

Paid Preparer's Use Only

Preparer's signature  Sheri L. Henneberry  
 Date 8-31-09  
 Check if self employed   Preparer's Identifying Number (See instructions) N/A  
 Firm's name (or yours if self employed), address, and ZIP + 4 SHERI L HENNEBERRY CPA  
 408 SOUTH MAIN STREET  
 PRINCETON, IL 61356  
 EIN N/A  
 Phone no (815) 872-5515

May the IRS discuss this return with the preparer shown above? See instructions

Yes  No

## AMERICAN CORN GROWERS ASSOCIATION

52-1513597

**Statement 1**  
**Form 990-EZ, Part I, Line 16**  
**Other Expenses**

Advertising and Promotion	\$	22,749.
Bank Service Chg		226.
Conferences, Conventions, and Meetings		18,309.
Corporate Fees		75.
Credit Processing Fees		323.
Dues & Subscriptions		443.
Insurance		3,133.
Interest		4,454.
Internet		146.
Office Expenses		2,417.
Telephone		7,532.
Texas Chapter Support		3,000.
Travel		8,373.
Workshops		2,658.
Total	\$	<u>73,838.</u>

**Statement 2**  
**Form 990-EZ, Part II, Line 24**  
**Other Assets**

	<u>Beginning</u>	<u>Ending</u>
Prepaid Expenses and Deferred Charges	\$ 0.	\$ 69.
Total	<u>\$ 0.</u>	<u>\$ 69.</u>

**Statement 3**  
**Form 990-EZ, Part II, Line 26**  
**Total Liabilities**

	<u>Beginning</u>	<u>Ending</u>
Accounts Payable and Accrued Expenses	\$ 0.	\$ 6,837.
Secured Mortgages and Notes Payable	57,016.	52,127.
Total	<u>\$ 57,016.</u>	<u>\$ 58,964.</u>

**Statement 4**  
**Form 990-EZ, Part III**  
**Organization's Primary Exempt Purpose**

The American Corn Growers Association (ACGA) is an organization of corn producers representing the mainstream of American production, agriculture and broad producer interests. ACGA develops and conducts programs on behalf of corn and other agricultural commodity producers including market development, research development, and representation in policy making at the local, state and federal levels.

## AMERICAN CORN GROWERS ASSOCIATION

52-1513597

Statement 5  
Form 990-EZ, Part IV  
List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title and Average Hours Per Week Devoted	Compen- sation	Contri- bution to EBP & DC	Expense Account/ Other
KEITH BOLIN 222 94 925 EAST STREET SHEFFIELD, IL 61361	President 0	\$ 0.	\$ 0.	\$ 0.
KEITH DITTRICH 53495 840 RD TILDEN, NE 68781	Chairman 0	0.	0.	0.
TROY ROUSH 10180 E 700 NORTH VAN BUREN, IN 46991	Vice President 0	0.	0.	0.
LARS HERSETH 39949 11TH STREET HOUGHTON, SD 57449	Vice President 0	0.	0.	0.
MARK LOUNSBERY 16453 482ND AVENUE REVILLO, SD 57259	Treasurer 0	0.	0.	0.
DAVID DeCHANT 8029 CR 39 FT LUPTON, CO 80621	Secretary 0	0.	0.	0.
PAM HORWITZ 18345 1250 N AVENUE TISKILWA, IL 61368	Executive Direc 40.00	39,500.	0.	0.
LARRY MITCHELL PO BOX 18157 WASHINGTON, DC 20036	DIR OF GOVT AFF 0	0.	0.	0.
MIKE ALBERTS 2004 E 24TH RD MARQUETTE, NE 68854	BOARD MEMBER 0	0.	0.	0.
CHARLES MATTIS 12352 E 2100 N RD DANVILLE, IL 61834	BOARD MEMBER 0	0.	0.	0.
CARL KING 707 W GRANT DIMMITT, TX 79027	Chairman Emerit 0	0.	0.	0.
ROBERT KOSKAN RT 1 BOX 117 WOOD, SD 57585	BOARD MEMBER 0	0.	0.	0.

## AMERICAN CORN GROWERS ASSOCIATION

52-1513597

Statement 5 (continued)  
Form 990-EZ, Part IV  
List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title and Average Hours Per Week Devoted	Compen- sation	Contri- bution to EBP & DC	Expense Account/ Other
JOHN ADERMANN RR 3 BOX 55 RAMSEY, IL 62080	BOARD MEMBER 0	\$ 0.	\$ 0.	\$ 0.
JOE BREWER RT 1 BOX 198 RAMSEY, IL 62080	BOARD MEMBER 0	0.	0.	0.
HAROLD BOB BENNETT BOX 401 HART, TX 79043	PARLIAMENTARIAN 0	0.	0.	0.
ROGER RICHARDSON 1947 OLD FURNACE ROAD EDEN, MD 21822	BOARD MEMBER 0	0.	0.	0.
TOM CURL 4048 KILMARTIN DR TALLAHASSEE, FL 32308	BOARD MEMBER 0	0.	0.	0.
SAM DARWIN 191 DARWIN RD HUNTSVILLE, AL 35881	BOARD MEMBER 0	0.	0.	0.
LOUIS SMITH 1538 CO RD 100 FREEMONT, OH 43420	BOARD MEMBER 0	0.	0.	0.
CORKY JONES 72983 647 AVENUE BROWNVILLE, NE 68321	BOARD MEMBER 0	0.	0.	0.
MARK KUHN 2667 240TH STREET CHARLES CITY, IA 50616	BOARD MEMBER 0	0.	0.	0.
GALE LUSH 12374 STATE HWY 4 WILCOX, NE 68982	BOARD MEMBER 0	0.	0.	0.
DAN McGUIRE 4540 OAKRIDGE CIRCLE LINCOLN, NE 68516	BOARD MEMBER 0	0.	0.	0.
DENNIS MITCHELL 39831 117TH ST HOUGHTON, SD 57449	BOARD MEMBER 0	0.	0.	0.



## AMERICAN CORN GROWERS ASSOCIATION

52-1513597

Statement 5 (continued)  
Form 990-EZ, Part IV  
List of Officers, Directors, Trustees, and Key Employees

<u>Name and Address</u>	<u>Title and Average Hours Per Week Devoted</u>	<u>Compen- sation</u>	<u>Contri- bution to EBP &amp; DC</u>	<u>Expense Account/ Other</u>
VIRGINIA SOLHIEM 25289 483RD AVE GARRETSON, SD 57030	BOARD MEMBER 0	\$ 0.	\$ 0.	\$ 0.
DON CLIFTON 306 WARNER ROAD MILFORD, DE 19963	BOARD MEMBER 0	0.	0.	0.
STEVE WATERS 29964 286TH AVENUE CARTER, SD 57580	BOARD MEMBER 0	0.	0.	0.
JOHN DITTRICH 57397 840 ROAD MEADOW GROVE, NE 68752	POLICY ANALYST 0	0.	0.	0.
VIC TOMKA 14386 210TH STREET CARROLL, IA 51401	DIRECTOR 0	0.	0.	0.
WAYNE DECKER 1901 CO RD 136 -- PO BOX 96 HUTTO, TX 78634	BOARD MEMBER 0	0.	0.	0.
EUGENE PAUL  , MN	Director 0	0.	0.	0.
Total		<u>\$ 39,500.</u>	<u>\$ 0.</u>	<u>\$ 0.</u>

MA: Ed  
S-15-09

Form **8868**  
(Rev April 2008)  
Department of the Treasury  
Internal Revenue Service

### Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

► File a separate application for each return

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
  - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)
- Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868**

**Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

**Electronic Filing (e-file).** Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on e-file for Charities & Nonprofits.

Type or print  File by the due date for filing your return. See instructions	Name of Exempt Organization <b>AMERICAN CORN GROWERS ASSOCIATION</b>	Employer identification number <b>52 1513597</b>	
	Number, street, and room or suite no. If a P O box, see instructions <b>1730 M STREET N W , SUITE 911 P O BOX 18157</b>		
	City, town or post office, state, and ZIP code. For a foreign address, see instructions <b>WASHINGTON, DC 20036</b>		

**Check type of return to be filed (file a separate application for each return)**

- |  |  |                                    |
|--|--|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation)                | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL         | <input type="checkbox"/> Form 990-T (sec 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ         | <input type="checkbox"/> Form 990-T (trust other than above)     | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF         | <input type="checkbox"/> Form 1041-A                             | <input type="checkbox"/> Form 8870 |

• The books are in the care of ► TINA SMITH 1531 W PERU ST, PRINCETON, IL 61356

Telephone No ► ( 815 ) 879-5515 FAX No ► ( 815 ) 3515

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ . If this is for the whole group, check this box  . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension will cover

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 08-15, 2009, to file the exempt organization return for the organization named above. The extension is for the organization's return for

- calendar year 2008 or
- tax year beginning \_\_\_\_\_, 20\_\_\_\_, and ending \_\_\_\_\_, 20\_\_\_\_\_

2 If this tax year is for less than 12 months, check reason  Initial return  Final return  Change in accounting period

<b>3a</b> If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	<b>3a</b>	\$	0
<b>b</b> If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	<b>3b</b>	\$	0
<b>c Balance Due.</b> Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	<b>3c</b>	\$	0

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions