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### Form **990**

SCANNED JAN 2 8 2010

Department of the Treasury Internal Revenue Service

For the 2008 calendar year, or tax year beginning

### **Return of Organization Exempt From Income Tax**

August 1

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

benefit trust or private foundation)

2008, and ending

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

OMB No 1545-0047

Open to Public July 31 20 09

3_	Check if	applicable	Please use IRS	C Name of organization California Farm Bureau Scholarship Found	dation	-	yer identification number
╝	Address	change	label or	Doing Business As		94	6070123
	Name c	hange	print or type	Number and street (or PO box if mail is not delivered to street address) Room/suit	е		none number
	Initial re	turn	See Specific	2300 River Plaza Drive		(916)	561-5520
$\supset$	Termina	tion	Instruc-	City or town, state or country, and ZIP + 4			
	Amende	ed return	tions	Sacramento CA 95833-3293	<del></del>	G Gross r	eceipts \$ 3,072,669
	Application	on pending	F Nan	ne and address of principal officer Douglas W Mosebar, President	H(a) Is this	a group retur	m for affiliates <sup>2</sup> Yes No
			2300 F	River Plaza Drive, Sacramento CA 95833-3293	H(b) Are a	II affiliates	included? Yes No
1	Tax-ex	empt status	s 🗾 5	i01(c) ( 3 ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527	If "No	o," attach a	a list (see instructions)
J	Websi	ite: ► wv	ww.cfbi	.com	H(c) Group e	exemption nu	ımber ▶
<b>(</b>	Type of	organization	Z Corpo	ration ☐ Trust ☐ Association ☐ Other ▶ ☐ L Year of formation	n <b>1953</b>	M State of	of legal domicile CA
P	art I	Summ	ary				
& Governance		pursue	a caree	the organization's mission or most significant activities: to give in the agricultural industry by awarding university scholars  If the organization discontinued its operations or disposed of more than	hips 		ith a desire to
ಳ	3	Number	of votir	ng members of the governing body (Part VI, line 1a).		. 3	4
es	4			pendent voting members of the governing body (Part VI, line 1b)	)	4	1
Activities	5			employees (Part V, line 2a)		5	0
Å	6			volunteers (estimate if necessary)		6	0
_				elated business revenue from Part VIII, line 12, column (C)		7a	0
				usiness taxable income from Form 990-T, line 34		7b	0
					Prior Ye	ar	Current Year
	8	Contribu	tions ar	nd grants (Part VIII, line 1h)	1,	182,394	3,016,337
Revenue	9			e revenue (Part VIII, line 2g)		0	0
eve	10	-		me (Part VIII, column (A), lines 3, 4, and 7d)		39,157	56,332
ď	11			Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0	0
				dd lines 8 through 11 (must equal Part VIII, column (A), line 12 )	1,:	221,551	3,072,669
	1			lar amounts paid (Part IX, column (A), lines 1-3)		230,250	158,750
				or for members (Part IX, column (A), line 4)		0	0
es	15		-	ompensation, employee benefits (Part IX, column (A), lines 5–10)		0	0
Expenses	160			draising fees (Part IX, column (A), line 11e)		0	0
×	I ME			expenses (Part IX, column (D), line 25) ►	2.10.1000	CACOUNT.	DETAILS NAMED TO
_	P	Oth R		(Part X, column (A), lines 11a-11d, 11f-24f)	<u> </u>	9,880	6,674
				Add lines 12-17 (must equal Part IX, column (A), line 25).		240,130	<del></del>
	18	Advenue.	Jenses. Jessæxi	genses (Buthedt line 18 from line 12		981,421	2,907,245
200		31 37	XIV Z	2 2 10 10 1	Beginning of		End of Year
Assets or	20	Tallel	<del></del>	- JEV 100 16		463,912	4,208,036
ASS	20	Tata	בות ב	rt X, ine = 6)		222,595	158,750
Ret A	21	Not see	10 - 40 - 41	and balances. Subtract line 21 from line 20		241,317	4,049,286
	art II		ature				1 .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	gn	Under pe	nalties of	perjury, I declare that I have examined this return, including accompanying schedulie, correct, and complete Declaration of preparer (other than officer) is based on a	les and statem all information	ents, and to of which p	o the best of my knowledge reparer has any knowledge
	ere	Sign	ature of	officer	Date	•	
		N   Y	Hau	y the winn veasive			
		Туре	or print	name and title			
Pai	d	Preparer signature		self	eck if ployed ▶ ☐	Preparer's (see instruc	identifying number ctions)
	parer's						<del></del>
	e Only	Firm's na	ame (or ye	ours	EIN	<b>&gt;</b>	<u> </u>
		address,	and ZIP		Phone n	o. ▶ (	)
Μa	ay the	IRS disc	uss this	return with the preparer shown above? (see instructions) .			. Yes No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form **990** (2008)

Par	Statement of Program Service Accomplishments (see instructions)	
1	Briefly describe the organization's mission: promote ag education with university scholarships	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  If "Yes," describe these new services on Schedule O	☐ Yes ☑ No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?  If "Yes," describe these changes on Schedule O.	☐ Yes ☑ No
4	Describe the exempt purpose achievements for each of the organization's three largest program services Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amou allocations to others, the total expenses, and revenue, if any, for each program service reported.	
4a	(Code. ) (Expenses \$ 160,274 including grants of \$ 158,750 ) (Revenue \$ scholarship awards for 60 university / college students	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$	
		<del></del>
4c	(Code <sup>-</sup> ) (Expenses \$ including grants of \$) (Revenue \$	) 
		·····
		· · · · · · · · · · · · · · · · · · ·
	Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )	
40	Total program service expenses ▶ \$ 160.274 (Must equal Part IX, Line 25, column (B).)	

Par	t 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	✓	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	✓	
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_		✓
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		<b>✓</b>
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	N/A	
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		✓_
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		✓
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		✓_
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, IX, or X as applicable	11	✓	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	✓	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<b>✓</b>
		14a		<b>✓</b>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		✓
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		✓
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III.	16		1
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		1
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		✓
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		✓
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		<b>√</b>
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	1	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	•	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	✓	<del></del>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions	24a		1
h	24b-24d and complete Schedule K. If "No," go to question 25	24b	N/A	<u> </u>
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year		.,	
·	to defease any tax-exempt bonds?		N/A	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	N/A	
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .	25a	_	✓
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		✓
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		<b>✓</b>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		<b>√</b>

Part IV	~· · · · · / C	quired Schedules	
	Chacklist at Ma	MILITON SCHOOLIDE	(COnfinited)
rait iv	OHECKHOL OF IN	dulled ochedules	ICUIRRIUGUI

			res	NO
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity	:		1
	(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		<b>1</b>
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV.	28b		✓
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		✓
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		✓
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	✓	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		✓
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI			
	· · · · · · · · · · · · · · · · · · ·	37		✓

Form **990** (2008)

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . Ltb 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	<b>✓</b>	
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   2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	N/A	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see			
	instructions)	.		
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
	this return?	3a		<b>V</b>
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	N/A	
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	4a		1
	account)?	70		_
b	If "Yes," enter the name of the foreign country ►	.		
	and Financial Accounts.	. ]		
52	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<b>7</b>
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity			
Ū	Regarding Prohibited Tax Shelter Transaction?	5c	N/A	
6a	Did the organization solicit any contributions that were not tax deductible?	6a		<b>\</b>
	If "Yes," did the organization include with every solicitation an express statement that such contributions or	.		
-	gifts were not tax deductible?	6b	N/A	
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than			,
	\$75?	7a		<b>V</b>
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	N/A	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	. <b>.</b> .		
	required to file Form 8282?	7c		<b>-</b>
	in res, indicate the number of roms seed mad during the year.			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		- <del>-</del>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		1
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	N/A	
_	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7h	N/A	
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section	.		
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8	N/A	
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.	·		
	Did the organization make any taxable distributions under section 4966?	9a	N/A	
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	N/A	
	Section 501(c)(7) organizations. Enter:			
	initiation rees and capital contributions included on rair viii, line 12			
	Cross recorpts, molded on room see, rare vin, into 12, for public dee of olde facilities	,		
	Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders 11a N/A			
	dioss income from members of shareholders			
D	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	amounts due or received from them.)	12a	N/A	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.   12b   N/A			

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the		1	İ
	circumstances, processes, or changes in Schedule O. See instructions.		Ì	i
1a	Enter the number of voting members of the governing body			ì
b	Enter the number of voting members that are independent			į
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			,!
	any other officer, director, trustee, or key employee?	_2_		<u> </u>
3	Did the organization delegate control over management duties customarily performed by or under the direct			,
	supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		<del>-</del>
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		<del></del>
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		
6	Does the organization have members or stockholders?	6	•	
/a	Does the organization have members, stockholders, or other persons who may elect one or more members	7a	<b>[</b>	
<b>L</b>	of the governing body?	7b		<b>√</b>
8 8	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?  Did the organization contemporaneously document the meetings held or written actions undertaken during			<u> </u>
0	the year by the following.			
2	The governing body?	8a	7	
	Each committee with authority to act on behalf of the governing body?	8b	1	
	Does the organization have local chapters, branches, or affiliates?	9a		<b>✓</b>
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
-	affiliates, and branches to ensure their operations are consistent with those of the organization?	9b	N/A	
0	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations	40		,
	must describe in Schedule O the process, if any, the organization uses to review the Form 990	10		✓
1	Is there any officer, director or 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	11		1
Sec	tion B. Policies			
	AIOI D. I OIOIOO		Yes	No
2a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	<b>√</b>	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give		Ò	
-	rise to conflicts?	12b	✓	
^	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
C	bues the digalization regularly and consistently monitor and emorge compilance with the policy: ii res,			
	describe in Schedule O how this is done	12c	1	
13	describe in Schedule O how this is done  Does the organization have a written whistleblower policy?	12c 13	<b>√</b>	
	describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?			
14	Does the organization have a written whistleblower policy?	13		
13 14 15	Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?	13		
14 15 a	Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  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?	13 14 15a		
14 15 a	Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  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?  Other officers or key employees of the organization?	13		
14 15 a b	Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  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?  Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)	13 14 15a		· ·
14 15 a b	Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  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?  Other officers or key employees of the organization?	13 14 15a 15b		<u> </u>
14 15 a b	Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  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?  Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	13 14 15a		<b>V</b>
14 15 a b	Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  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?  Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	13 14 15a 15b		✓ ·
14 15 a b	Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  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?  Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard	13 14 15a 15b	>	<b>V</b>
14 15 a b 16a b	Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  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?  Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	13 14 15a 15b		<b>V</b>
14 15 a b 16a b	Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  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?  Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  Etion C. Disclosure	13 14 15a 15b	>	✓ ·
14 15 a b 16a b	Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  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?  Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  Etion C. Disclosure  List the states with which a copy of this Form 990 is required to be filed California	13 14 15a 15b 16a	V V	✓ ✓
14 15 a b 16a b	Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  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?  Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  Etion C. Disclosure  List the states with which a copy of this Form 990 is required to be filed California  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)	13 14 15a 15b 16a	V V	<b>✓</b>
14 15 a b 16a b	Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  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?  Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  Etion C. Disclosure  List the states with which a copy of this Form 990 is required to be filed ▶ California  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(crosure)) available for public inspection. Indicate how you make these available. Check all that apply.	13 14 15a 15b 16a	V V	<b>✓</b>
14 15 a b 16a b	Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  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?  Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  Extion C. Disclosure  List the states with which a copy of this Form 990 is required to be filed ▶ California  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c available for public inspection. Indicate how you make these available. Check all that apply.  □ Own website □ Another's website ☑ Upon request	13 14 15a 15b 16a 16b	N/A	<b>V</b>
14 15 a b 16a b	Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  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?  Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  Etion C. Disclosure  List the states with which a copy of this Form 990 is required to be filed ▶ California  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(organization) available for public inspection. Indicate how you make these available. Check all that apply.  □ Own website □ Another's website ☑ Upon request  Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	13 14 15a 15b 16a 16b	N/A	✓ ·
14 15 a b 16a b	Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  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?  Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  Extion C. Disclosure  List the states with which a copy of this Form 990 is required to be filed ▶ California  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c available for public inspection. Indicate how you make these available. Check all that apply.  □ Own website □ Another's website ☑ Upon request	13 14 15a 15b 16a 16b	N/A	✓ .

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

### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Use Schedule J-2 if additional space is needed
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if the organization did not co	mpensate	any c	offic			ctor,	trus	tee, or key em	ployee.	
(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average hours per					that ap		Reportable compensation	Reportable compensation	Estimated amount of
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
George Gomes Director	< 1	1						0	0	0
Douglas W Mosebar President & Director	<1	<b>√</b>		1				0	279,816	68,176
Paul J Wenger 1st VP & Director	<1	1		1				0	95,438	0
Kenneth Watkins III 2nd VP & Director	<1	1		1				0	129,292	0
Joseph M Peters Secretary & Treasurer (partial year)	<1			1				0	216,437	70,058
Nancy McDonough Asst Secretary	<1			1				0	203,853	54,259
Mary H Winn Treasurer (partial year)	<1			1				0	129,235	33,784
		1						:		
		:								

Pa	rt VII Section A. Officers, Directors, Tru	stees, Key	Emp	loy	ees,	an	d Hig	hes	t Compensate	d Employees (co	ntınued)
	(A)	(B)				C)			(D)	(E)	(F)
	Name and title	Average hours per week		<del></del>	Officer	κey	that ap Highest employ	ply) Former	Reportable compensation from the	Reportable compensation from related organizations	Estimated amount of other compensation
			Individual trustee or director	nstitutional trustee		employee	Highest compensated employee		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
1b	Total							<b></b>	0	1,054,071	226,277
2	Total number of individuals (including thos	e in 1a) wh	no rec	eive	ed r	nor	e thar	1 \$1	00,000 in repo	ortable compens	ation from the
	organization ► 0										Yes No
3	Did the organization list any former office	er. director	or tr	uste	e. I	(ev	empl	ove	e. or highest o	compensated	Tes No
•	employee on line 1a? If "Yes," complete S	chedule J	for su	ıch	ındı	vidi	ıal		· ·		3 🗸
4	For any individual listed on line 1a, is the sthe organization and related organizations individual.										4 1
5	Did any person listed on line 1a receive services rendered to the organization? If "	or accrue Yes," com	compolete	pen: Sch	satı edu	on i ile J	from <i>I for s</i>	any :uch	unrelated org	anization for	5 🗸
Se	ction B. Independent Contractors										
1	Complete this table for your five highest compensation from the organization.	ompensate	ed ind	ере	nde	ent o	contra	cto	rs that receive	d more than \$10	00,000 of
	(A) Name and business add	iress							(B) Description of s	services	(C) Compensation
N/A	\										
								-			
2	Total number of independent contractors compensation from the organization ▶ 0		those	in	1) v	νhο	recei	ved	more than \$1	00,000 in	

Part	VIII	Statement of Re	venue					
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b c d e	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions, gifts, gand similar amounts not inclu	grants,	10,337				
ontril of ot	g	Noncash contributions include		0				·
	ĥ	Total. Add lines 1a-1f	····	. ▶	3,016,337			
Program Service Revenue	2a b			Business Code				
Servic	d					-		
Program		All other program servi Total. Add lines 2a-2f		. •	0			
	3	Investment income (incother similar amounts)	luding dividends	s, interest, and	34,765			34,765
	4	Income from investment of		d proceeds	0			
	5	Royalties	(ı) Real	(II) Personal				,
	b	Gross Rents . Less rental expenses Rental income or (loss) Net rental income or (lo	oss)	<b>&gt;</b>	0			
		Gross amount from sales of assets other than inventory	(i) Securities 21,567	(II) Other	-			,
	b	Less: cost or other basis and sales expenses .	0	0				1
		Gain or (loss) .	21,567	. ▶	21,567			21,567
Revenue	8a	Gross income from events (not including \$ of contributions reported See Part IV, line 18						
Other R		Less direct expenses	b					
0		Net income or (loss) fro	_	vents ►	0			
		Gross income from gam See Part IV, line 19 Less. direct expenses.	-					1
		Net income or (loss) fro		ities . ▶	0			
	b	Gross sales of inverteurns and allowances Less: cost of goods so Net income or (loss) from	a ld <b>b</b>		0		-	1
		Miscellaneous Reve		Business Code				
	11a b							
	d	All other revenue				. ,		
		Total. Add lines 11a-1		. •	0			
	12	Total Revenue. Add ling 9c, 10c, and 11e	nes 1h, 2g, 3, 4,	5, 6d, 7d, 8c, ▶	3,072,669	0	0	56,332

Part IX	Statement of Functional Expenses	
	Section 501(c)(3) and 501(c)(4) organizations must complete all columns.	_
Δ11 -	other organizations must complete column (A) but are not required to complete columns (B) (C)	and (D)

	All other organizations must complete co	lumn (A) but are no	t required to comp	olete columns (B),	(C), and (D).
	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	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	158,750	158,750		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members .  Compensation of current officers, directors, trustees, and key employees		·		
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				···
10	Payroll taxes			<del></del>	
11	Fees for services (non-employees):	E 000		- 444	
	Management	5,000		5,000	
b	Legal				
	Accounting				
d	Lobbying	<u> </u>			
	Professional fundraising services. See Part IV, line 17				
	Investment management fees .				
g	Other				
12	Advertising and promotion			450	
13	Office expenses	150		150	
14	Information technology				
15	Royalties				
16	Occupancy	4 504	4 504		
17	Travel	1,524	1,524		
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.				
23	Insurance				
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а					
b					
c					
d					
e					
f	All other expenses				
	Total functional expenses. Add lines 1 through 24f				
26	Joint Costs. Check here ► ☐ if following SOP 98-2 Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	165 424	160 274	5.150	0

Pa	rt X	Balance Sheet			
			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash—non-interest-bearing		1	
	2	Savings and temporary cash investments	526,644	2	330,673
	3	Pledges and grants receivable, net	0	3	3,000,000
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete	we consider the first of the state of the st		
		Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
SS	8	Inventories for sale or use		8	
⋖	9	Prepaid expenses and deferred charges		9	· · · · · · · · · · · · · · · · · · ·
	10a	Land, buildings, and equipment. cost basis 10a			'
	b	Less accumulated depreciation. Complete			
		Part VI of Schedule D		10c	
	11	Investments—publicly traded securities	936,013		876,108
	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	1,255		1,255
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,463,912		4,208,036
	17	Accounts payable and accrued expenses	2,845		0
	18	Grants payable	219,750	$\overline{}$	158,750
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
ies	21	Escrow account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key			
Ë		employees, highest compensated employees, and disqualified		22	
		persons. Complete Part II of Schedule L		23	
	23	Secured mortgages and notes payable to unrelated third parties		24	
	24	Unsecured notes and loans payable		25	<del></del>
	25 26	Other liabilities. Complete Part X of Schedule D  Total liabilities. Add lines 17 through 25	222,595	<del></del>	150 750
	20	Organizations that follow SFAS 117, check here ▶ ☑ and	222,555	26	158,750
ances		complete lines 27 through 29, and lines 33 and 34.			
	27	Unrestricted net assets	241,317	<del> </del>	220,135
ä	28	Temporarily restricted net assets	1,000,000	28	3,829,151
Fund Ba	29	Permanently restricted net assets		29	
٥		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			The second secon
Net Assets	30	Capital stock or trust principal, or current funds		30	
SS	31	Paid-in or capital surplus, or land, building, or equipment fund		31	<u>-</u>
4	32	Retained earnings, endowment, accumulated income, or other funds		32	4 2 4 2 2 2 2
Ž	33	Total net assets or fund balances	1,241,317	33	4,049,286
	34	Total liabilities and net assets/fund balances	1,463,912	34	4,208,036
Pā	rt XI	Financial Statements and Reporting	<del></del>		
4		According to the state of the s	Othor		Yes No
1		ounting method used to prepare the Form 990.   Cash Accrual		.0	2a ✓
		e the organization's financial statements compiled or reviewed by an ind		ι?	2b 🗸
b		e the organization's financial statements audited by an independent according to the december of the december		olah -	·   ==
C		es" to lines 2a or 2b, does the organization have a committee that assumes			7 2c ✓
2-		audit, review, or compilation of its financial statements and selection of an in a result of a federal award, was the organization required to undergo an			·   <del>==+</del>
Ja	HS 8	Single Audit Act and OMB Circular A-133?		· ioitii	"   3a   ✓
t		'es," did the organization undergo the required audit or audits?	<u> </u>		. 3b

### SCHEDULE A (Form 990 or 990-EZ)

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

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2008

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

Inspection
Employer identification number

	_	ia Farm Bur	eau Scholarshi	p Foundation					94		6070123
Par	t I	Reason	for Public Ch	arity Status (All or	ganızatıd	ons mus	t compl	ete this	part.) (se	ee instru	ctions)
The	orga	anization is n	ot a private foun	dation because it is:	(Please o	heck only	y <b>one</b> org	ganization	ո.)		
1			•	rches, or association	•				•	A)(i).	
2				on 170(b)(1)(A)(ii). (Att						,,,	
3				nospital service organ			in sectio	n 170(h)	(1)/Δ\/iii\	(Attach S	Schedule H )
4				ition operated in conj							
•			-	ate:							Aryling. Enter the
5	П	•		the benefit of a colle							Lunit described in
3	_	_	(b)(1)(A)(iv). (Co		ge or um	versity ov	viled of t	perateu	by a gov	emmema	i dilit described iii
6		A federal, st	ate, or local gov	ernment or governme	ental unit	describe	d in <b>sect</b>	ion 170(l	o)(1)(A)(v)	).	
7	V			/ receives a substantia (1)(A)(vi). (Complete F		its suppo	ort from a	governm	nental uni	t or from	the general public
8	П			in section 170(b)(1)		`omolete	Part II \				
9	$\exists$			receives: (1) more that				m contrib	utions m	omborch	in foot, and gross
9	ш			ed to its exempt function							
				ent income and unre							
				after June 30, 1975.						· O · · · · · · ·	, morn basinesses
40	$\Box$	•	ŭ	•				•	•	(-\/A\ /	<b></b>
10	$\vdash$	-	-	nd operated exclusive	-	-	_				
11	Ш	-	-	ind operated exclusive	-						•
				olicly supported organ at describes the type							
									-	_	_
		a 🗆 Type		• •	• •	e III-Fun	-	_			Type III-Other
е	Ш			ify that the organizat							
		•		n managers and other	r than one	e or more	publicly	supporte	ed organiz	zations de	escribed in section
			section 509(a)(2)								
f		If the organi	zation received	a written determinati	on from	the IRS 1	that it is	a Type I	l, Type II	, or Type	III supporting
		•	, check this box				-			•	
g				the organization acce	epted any	gift or c	ontributio	on from a	iny of the	•	
		following pe									Yes No
		• • •	-	r indirectly controls, e		_		th person	is descrit	bed in (ii)	11g(i)
				ning body of the supp		ganizatio	n.				11g(ii)
				rson described in (i) a							
				of a person described						•	[11g(iii)]
<u>h</u>				ation about the organ							
(1)		e of supported anization	(ii) EIN	(iii) Type of organization (described on lines 1-9		organization sted in your		ou notify nzation in		ls the tion in col	(vii) Amount of support
	٥. و	a. nzavori		above or IRC section		document?	col (ı)	of your	(i) organi	zed in the	
				(see instructions))	Yes	No	Yes	No No	Yes	S? No	
		_			163	110	163	140	100	110	
									<u> </u>	1	

Par	Support Schedule for Org (Complete only if you chec					and 170(b)(1	)(A)(vi)
Sec	tion A. Public Support						
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	31,695	43,288	11,236	32,394	16,337	134,950
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 1-3	31,695	43,288	11,236	32,394	16,337	134,950
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)						100,160
6	Public support. Subtract line 5 from line 4						34,790
Sec	tion B. Total Support						
	lendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4	31,695	43,288	11,236	32,394	16,337	134,950
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	9,718	10,813	12,346	23,391	34,765	91,033
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 IV)						
11	Total support. Add lines 7 through 10 .	1					225,983
12	Gross receipts from related activities, etc	. (see instruction	ns) .			12	0
13	First five years. If the Form 990 is for organization, check this box and stop he tion C. Computation of Public Su	re	•	d, third, fourth	-	ear as a section	n 501(c)(3)
	<del></del>			1 ooluma (A)		14	15.39 %
14	Public support percentage for 2008 (line		•		•	15	14.56 %
15	Public support percentage from 2007 Sch						
16a	331/3 % support test—2008. If the organization qualifies				ine 14 is 33/3 9	6 or more, che	CK this box
b	33%% support test—2007. If the organization quality box and stop here. The organization quality	zation did not c ilifies as a publi	heck a box on cly supported o	line 13 or 16a, organization		•	check this
17a	10%-facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circum organization meets the "facts-and-circum	acts-and-circum	nstances" test,	check this box	and <b>stop here.</b>	Explain in Part	IV how the
b	10%-facts-and-circumstances test—2007 more, and if the organization meets the "forganization meets the "facts-and-circumstant"	acts-and-circum	stances" test, c	check this box a	ınd stop here.	Explain in Part	
18	Private foundation. If the organization did		-			-	tructions >

ar	Support Schedule for Orga (Complete only if you checke				)(2)	<del>- : : : : : : : : : : : : : : : : : : :</del>	
ci	tion A. Public Support	ed the box of	n line 9 of Pa	п і.)			
_	lendar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")						
	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			_			
	Gross receipts from activities that are not an unrelated trade or business under section 513						-
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf				_		
	The value of services or facilities furnished by a governmental unit to the organization without charge				_		
	Total. Add lines 1-5	_				-	<del> </del>
	Amounts included on lines 1, 2, and 3 received from disqualified persons .		<u> </u>				
	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
;	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)						
	tion B. Total Support		I #10005	( ) 0000	4 0 0007	1	I 40 = 1. 1
a	lendar year (or fiscal year beginning in) 🕨	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
	First five years. If the Form 990 is for toganization, check this box and stop I	nere		nd, third, fourth	n, or fifth tax y	year as a section	on 501(c)(3)
_	tion C. Computation of Public Sup				······································	145	
	Public support percentage for 2008 (lin- Public support percentage from 2007 S	chedule A, Pa	art IV-A, line 2			15 16	%
	ion D. Computation of Investmen			<del></del>		1.5	
	Investment income percentage for 2008 Investment income percentage from 20				olumn (f)) .	17	<u>%</u>

331/3 % support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/3 %, and line 18 is not more than 331/3 %, check this box and **stop here**. The organization qualifies as a publicly supported organization

Schedule A (Form 990 or 990-EZ) 2008	Page 4
Part IV Supplemental Information. Complete this part to provide the explanation required Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information.	by Part II, line 10; (see instructions)
PART II, line 17a	
Due to the nature and purpose of the organization, which is to perpetuate the agricultural industry by	providing
scholarships to college students pursuing careers in that field, the organization maintains a program	for
solicitation of funds from members of the agricultural industry and its supporters. Primarily through	activities of
its related organization, the California Farm Bureau Federation (CFBF), opportunities to contribute ar	e made available
at CFBF functions and in its weekly newspaper. The governing board of the Scholarship Foundation	is comprised of
persons with expertise in the agricultural field.	
	•••••
	•••••
	••••
·····	•••••
•••••	

### SCHEDULE D (Form 990)

### **Supplemental Financial Statements**

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Nam	e of the organization		Empl	oyer id	entification number
	ifornia Farm Bureau Scholarship Foundation		94	<u> </u>	6070123
Pa	Organizations Maintaining Donor Advised Funds or Other Similar the organization answered "Yes" to Form 990, Part IV, line 6.	r Fun	ds o	Acc	ounts. Complete if
	(a) Donor advised funds		(b)	Funds a	and other accounts
1	Total number at end of year				
2	Aggregate contributions to (during year)				
3	Aggregate grants from (during year)				
4	Aggregate value at end of year .				
5	Did the organization inform all donors and donor advisors in writing that the assets funds are the organization's property, subject to the organization's exclusive legal of			or ad	vised Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writing that used only for charitable purposes and not for the benefit of the donor or donor advimpermissible private benefit?	visor o	or othe	er	Yes No
Pa	rt II Conservation Easements. Complete if the organization answered "Yes	" to F	orm 9	990, F	Part IV, line 7.
2		ion of tion of	f certi	fied hi	lly important land area istoric structure ervation easement
	on the last say of the last your		Γ	I	Held at the End of the Year
а	Total number of conservation easements			2a	
b	Total acreage restricted by conservation easements	•		2b	
C	Number of conservation easements on a certified historic structure included in (a) .			2c	
d	Number of conservation easements included in (c) acquired after 8/17/06.		. [	2d	
3	Number of conservation easements modified, transferred, released, extinguished, of the taxable year ▶	r term	nnated	d by ti	he organization during
4	Number of states where property subject to conservation easement is located ▶	<b>-</b>			
5	Does the organization have a written policy regarding the periodic monitoring, inspending enforcement of the conservation easements it holds?				and Yes No
6	Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easement				
7	Amount of expenses incurred in monitoring, inspecting, and enforcing easements of	luring	the ye	ear►	\$
8	Does each conservation easement reported on line 2(d) above satisfy the requirement $170(h)(4)(B)(i)$ and section $170(h)(4)(B)(i)$ ?	ents o	f sect	on	. 🗌 Yes 🗌 No
9	In Part XIV, describe how the organization reports conservation easements in its rebalance sheet, and include, if applicable, the text of the footnote to the organization the organization's accounting for conservation easements.				
Pa	Organizations Maintaining Collections of Art, Historical Treasures, Complete if the organization answered "Yes" to Form 990, Part IV, line 8		her Si	milar	Assets.
1a	If the organization elected, as permitted under SFAS 116, not to report in its revenuant, historical treasures, or other similar assets held for public exhibition, education, or provide, in Part XIV, the text of the footnote to its financial statements that describe	resea	arch in	furthe	
b	If the organization elected, as permitted under SFAS 116, to report in its revenue st historical treasures, or other similar assets held for public exhibition, education, or provide the following amounts relating to these items. (i) Revenues included in Form 990, Part VIII, line 1		ch in	furthe	
	(i) Revenues included in Form 990, Part VIII, line 1				\$
2	If the organization received or held works of art, historical treasures, or other simi- following amounts required to be reported under SFAS 116 relating to these items:			or fina	ancial gain, provide the
a b	Revenues included in Form 990, Part VIII, line 1			<b>&gt;</b>	\$ \$

,								
	t III Organizations Maintaini	na Collections	of Art. H	istoric	al Treasure	s. or (	Other Similar As	Page 2
3	Using the organization's accession a items (check all that apply):							
a b	Public exhibition Scholarly research		d e		Loan or exch		orograms 	
С 4	Preservation for future generation Provide a description of the organization Part XIV.		s and exp	laın ho	w they furthe	er the o	organization's exe	mpt purpose in
5	During the year, did the organization s assets to be sold to raise funds rather	than to be maint	ained as p	art of t	he organization	on's col	lection?	Yes No
Pa	Trust, Escrow and Custo Part IV, line 9, or reported					ion ans	swered "Yes" to	Form 990, 
	Is the organization an agent, trustee included on Form 990, Part X?					itions o	r other assets no	t ☐ Yes ☐ No
b	If "Yes," explain the arrangement in	Part XIV and co	mpiete the	NOIIOI E	ing table:		An	nount
c	Beginning balance					10	;	
	Additions during the year					10	1	
e	Distributions during the year .					16	,	
f	Ending balance				•	11		
2a b	Did the organization include an amount "Yes," explain the arrangement in		), Part X,	line 21	? . ———			Yes No
Pa	rt V Endowment Funds. Cor	mplete if organ	<u>ızation ar</u>	nswere	ed "Yes" to	Form	990, Part IV, lin	
		(a) Current year	(b) Pric	or year	(c) Two yea	rs back	(d) Three years back	(e) Four years back
1a	Beginning of year balance							
b	Contributions							
С	Investment earnings or losses .		<u> </u>					
d	Grants or scholarships							
е	Other expenditures for facilities and programs							
	Administrative expenses End of year balance							
2	Provide the estimated percentage of	f the year end ba	alance hel	d as:				
а	Board designated or quasi-endowm		%					
b	Permanent endowment ▶	•						
	Term endowment ▶%							
3a	Are there endowment funds not in the organization by	e possession of t	he organız	ation th	nat are held a	and adr	ministered for the	Yes No
	(i) unrelated organizations							3a(i)
	(ii) related organizations			·. :				3a(ii)
	If "Yes" to 3a(II), are the related organization of the second of the se							3b
4	Describe in Part XIV the intended us  t VI Investments—Land, Bu					Dort V	lino 10	
	· · · · · · · · · · · · · · · · · · ·							AD Doole value
	Description of investment	(a) Cost or o	tner basis	( <b>b</b> ) C	ost or other	(c)	Depreciation	(d) Book value

1a Land . **b** Buildings

**d** Equipment e Other

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

Total. (Column (b) should equal Form 990, Part X, col. (B) line 25 ) ▶

Sched	ule D (Form 990) 2008				Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990	) to Fi	nancial Stateme	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	3,072,669
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	165,424
3	Excess or (deficit) for the year. Subtract line 2 from line 1			3	2,907,245
4	Net unrealized gains (losses) on investments			4	(99,276)
5	Donated services and use of facilities			5	
6	Investment expenses			6	
7	Prior period adjustments			7	
8	Other (Describe in Part XIV)			8	
9	Total adjustments (net). Add lines 4–8	_		9	(99,276)
10	Excess or (deficit) for the year per financial statements. Combine lines  XII Reconciliation of Revenue per Audited Financial Sta			10	2,807,969
			nts with Reven	ue per	2,973,393
1	Total revenue, gains, and other support per audited financial statemen	nts	•	·	2,373,333
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.	2a	(99,27	'6\	
a	Net unrealized gains on investments	2b	(55,27	<del>"</del>	
b	Recoveries of prior year grants	2c			
c d	Other (Describe in Part XIV)	2d			
	Add lines 2a through 2d		·	2e	(99,276)
3	Subtract line 2e from line 1	•	• •	3	3,072,669
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.	i I		. 📑	3,072,003
-	Investment expenses not included on Form 990, Part VIII, line 7b.	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines 4a and 4b			4c	0
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, Iir	ne 12)		5	3,072,669
Par	t XIII Reconciliation of Expenses per Audited Financial St		ents With Exper	ises pe	
1	Total expenses and losses per audited financial statements .			. 1	165,424
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	<u>.</u>		
b	Prior year adjustments	2b			
С	Losses reported on Form 990, Part IX, line 25	2c			
d	Other (Describe in Part XIV)	2d			_
е	Add lines 2a through 2d	-		2e	0
3	Subtract line 2e from line 1			3	165,424
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b .	4a		_	
b	Other (Describe in Part XIV)	4b			
С	Add lines 4a and 4b	•		. <u>4c</u>	0
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Pa	rt I, line	e 18)	5	165,424
	t XIV Supplemental Information				
	plete this part to provide the descriptions required for Part II, lines 3, 5				Part IV, lines 1b
and	2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and	Рап Х	III, lines 2d and 4b	)	
			·	·- <b></b>	
			••••••		
			••••••		

Schedule D (Forn	m 990) 2008	Page 5
Part XIV	Supplemental Information (continued)	_
	•••••••••••••••••••••••••••••••••••••••	
• • • • • • • • • • • • • • • • • • • •		

### **SCHEDULE 1** (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the U.S.

▶ Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.

▶ Attach to Form 990.

2008	Open to rubito Inspection
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OMB No 1545-0047

ŝ (h) Purpose of grant or assistance Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Employer identification number 6070123 Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on  $\supset$ Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance 94 (f) Method of valuation (book, FMV, appraisal, other) (d) Amount of cash grant | (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part IV and Schedule I-1 (Form 990) if additional space is needed Enter total number of section 501(c)(3) and government organizations (c) IRC section the selection criteria used to award the grants or assistance? if applicable General Information on Grants and Assistance California Farm Bureau Scholarship Foundation (D) EIN Enter total number of other organizations 1 (a) Name and address of organization or government Name of the organization Part I Part II

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat No 50055P

Schedule I (Form 990) 2008

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed. Schedule I (Form 990) 2008

Part III Grants a

Use schedule I-1 (Form 990) if additional space is needed	tional space is no	eded.			
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
scholarships to students pursuing careers in					
the agricultural industry	40	63,750	0	N/A	N/A
scholarships to students pursuing careers in					
rangeland management	20	95,000	0	N/A	N/A
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	ete this part to pi	ovide the information	on required in Part	I, line 2, and any other	additional information.
Scholarship recipients must provide verification of current enrollment in agricultural curriculum at a college or university before funds are released.	of current enrollm	ent in agricultural cu	rriculum at a collego	or university before fur	nds are released.
Scholarship funds are mailed directly to the college / university, which applies the funds to the student's account and notifies the student of receipt of funds.	ge / university, w	ich applies the fund	s to the student's ac	count and notifies the s	tudent of receipt of funds.

### **SCHEDULE J** (Form 990)

### Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

that answered "Yes" to Form 990, Part IV, line 23.

OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

ın Part III

▶ Attach to Form 990. To be completed by organizations

Employer identification number Name of the organization California Farm Bureau Scholarship Foundation 6070123 **Questions Regarding Compensation** No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions Payments for business use of personal residence ☐ Tax indemnification and gross-up payments Health or social club dues or initiation fees ☐ Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or 1b provision of all of the expenses described above? If "No," complete Part III to explain Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all 2 officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply. ☐ Compensation committee ☐ Written employment contract Independent compensation consultant ✓ Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a: a Receive a severance payment or change of control payment?. 4a . . . . 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan?. 4¢ c Participate in, or receive payment from, an equity-based compensation arrangement?. If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization? 5b **b** Any related organization? . . . . If "Yes" to line 5a or 5b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of 6a a The organization? 6b **b** Any related organization? If "Yes" to line 6a or 6b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III . . . . . . 7 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was

subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe

Page 2

Schedule J (Form 990) 2008

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

		(B) Breakdown of W-2		and/or 1099-MISC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable	compensation	benefits	(a)-(ı)(a)	reported in prior Form 990 or
								Form 990-EZ
Douglas W Mosebar	8							
	€	278,268	0	1,548	0	68,176	347,992	
Joseph M Peters	€ €	207,600	0	8,837	15,500	54,558	286,495	
Nancy N McDonough	€ €	197.712	0	6.141	0	54.259	258.112	
Mary H Winn	88			5,611	0	33,784	163,019	
	88							
	88							
	88							
	ŒŒ							
	3							
	€ €							
	88							
	€ €							
	(1)							
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	≘≘							
							Sch	Schedule J (Form 990) 2008

Page 3	so complete this part									Schodule (Form 900) 2008	Schedule o (Form and Avec
	descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part										
	d for Part I, lines 1a, 1b, 4c,										
	tion, or descriptions required										
of ormation	de the information, explanat זור.										
Schedule J (Form 990) 2008	Complete this part to provide the information, explanation, or for any additional information.										

### **SCHEDULE O** (Form 990)

### **Supplemental Information to Form 990**

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Inspection

Name of the organization	Employer identification number	er
California Farm Bureau Scholarship Foundation	94 6070123	
Part VI, line 6 - Members or Stockholders		
California Farm Bureau Federation is the sole member of the corporation.		
Part VI, line 7a - Members who elect governing body		
The governing body (board of directors) is appointed by California Farm Bureau Federal	tion.	
Part VI, line 10 - Review Process for Form 990		
Form 990 is prepared by the Accounting Manager, reviewed and signed by the Treasure	r.	
Subsequent to filing, the return will be reviewed by the Executive Committee.		
Part VI, line 12c - Conflict of Interest policy compliance		
New members of the board of directors must review and sign a copy of the policy. The	policy is discussed annua	ally
with all board members and each is required to update their agreement to comply with t	he policy.	
Part VI, line 15a - Determining Compensation		
Utilized outside consultant for salary study and recommendation.		
Part VI, line 19 - Disclosure		
The organization makes its governing documents, conflict of interest policy, and financi	ial statements available to	the .
public upon request.		

### SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

California Farm Bureau Scholarship Foundation Name of the organization

# Related Organizations and Unrelated Partnerships

▶ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ▼ See separate instructions.

Open to Public Inspection 2008

OMB No 1545-0047

Employer identification number

6070123 94

Part I	Identification of Disregarded Entities					
	(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Durect controlling entity
Part II	Identification of Related Tax-Exempt Organizations					
	(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity status (if section 501(c)(3))	(F) Direct controlling entity
- California	- California Farm Bureau Federation	agricultural member-	CA	501(c)(5)	n/a	n/a
2300-Rive	-2308-River Plaza Drive, Sacramento CA-95833	ship services				
-94-0357610-	-14					

Schedule R (Form 990) 2008

Cat No 50135Y

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Partnership	
tions Taxable as a P	
Related Organiza	
Identification of	
Part III	

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign	(D) Direct controlling entity	(E) Predominant income (related, investment, unrelated)	(F) Share of total income	(G) Share of end-of-year assets	(H) Disproportionate allocations?	(f) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(J) General or managing partner?
							Yes No		Yes No
NA									
Part IV Identification	of Related Orga	ınization	s Taxable as a	Identification of Related Organizations Taxable as a Corporation or Trust	ust				
141			ij	9	-	١			

# Identification of Related Organizations Taxable as a Corporation or Trust

(A)	(8)		É	E E	9	(9)	3
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Type (C co	Share of total income	Share of end-of-year assets	Percentage ownership
Farm-Employers Labor Service	ag labor mgmt CA	CA	N/A	C corp	N/A	N/A	N/A
-2300 River Plaza Drive, Sacramento CA 95833							
23-7080681							

Schedule R (Form 990) 2008

### Schedule R (Form 990) 2008

Part V Transactions With Related Organizations		
Note. Complete line 1 if any entity is listed in Parts II, III, or IV.  1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II–IV?	d in Parts II–IV?	Yes No
		1a
<b>b</b> Gift, grant, or capital contribution to other organization(s)		10
c Giff, grant, or capital contribution from other organization(s)		10 1
d Loans or loan guarantees to or for other organization(s)		7
e Loans or loan guarantees by other organization(s)		<b>)</b>
f Sale of assets to other organization(s)		14
g Purchase of assets from other organization(s)		19
h Exchange of assets		14 ;
i Lease of facilities, equipment, or other assets to other organization(s)		<b>1</b>
j Lease of facilities, equipment, or other assets from other organization(s)		1j
k Performance of services or membership or fundraising solicitations for other organization(s)		*;
Performance of services or membership or fundraising solid		1 4
m Sharing of facilities, equipment, mailing lists, or other assets		- t
o Reimbursement paid to other organization for expenses		10 /
p Reimbursement paid by other organization for expenses		1p /
<b>q</b> Other transfer of cash or property to other organization(s)		)
	relationships and transa	action thresholds.
(A) Name of other organization(s)	(B) Transaction type (a-r)	(C) Amount involved
California Farm Bureau Federation (cash contribution)	o o	337
Farm Employers Labor Service (cash contribution)	S	10,000
California Farm Bureau Federation (management fee)	L	2,000
California Farm Bureau Federation (in-kind services)	Z	23,592
(5)		
(9)		

Schedule R (Form 990) 2008

## Part VI

## Unrelated Organizations Taxable as a Partnership

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

of gross reversely triat was frot a related organization. See instructions regarding exclusion for certain investment partitions.	istructions regarding exc	משוטון זטן כפו נמון וו	מפאווופו  -	וו שמווו	diamps.		ú	199		5
· · · · · · · · · · · · · · · · · · ·	(a)	ે	• . 	_	1		-		(	
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign country)	Are all partners section 501(c)(3)	artners lon (3)	Share of end-of-year assets	Dispro	Disproportionate allocations?	Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gen mar par	General or managing partner?
			Yes	2		Xes X	Yes		Yes	Š
N/A										
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								Schedule R (Form 990) 2008	)66 w	) 2008