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SCANNED JAN 21 2010

Form **990-EZ**

OMB No 1545-1150

Short Form
Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

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. Department of the Treasury Internal Revenue Service

Open to Public Inspection

A	or th	e 2008 calendar year, or tax year beginning OCT 1, 2008 and ending SEP 3	0	2009
В	Check if upplicab	Please C Name of organization D Em	ployer i	dentification number
	Addres	ss use IRS		
	Name Change	print or DOUGLAS COUNTY FARM BUREAU	3-6	028107
	Initial	Number and street (or P.O. box, if mail is not delivered to street address) Room/suite E Tel	ephone	number
	Termi		<u>541</u>) 957-1524
	returr	raded Itons City or town, state or country, and ZIP + 4	oup Exe	mption
	Applica pendin	ROSEBURG, OR 97471 Nu	mber 🕨	<u> </u>
	• Sec	tion 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed G Accounting in	nethod:	X Cash Accrual
		Schedule A (Form 990 or 990-EZ). Other (specif		
1 1	Nebsit		X if t	he organization is not
<u>J (</u>	Organi			lule B (Form 990, 990-EZ, or 990-PF)
	Check)		than \$2	25,000. A return is not
		d, but if the organization chooses to file a return, be sure to file a complete return.		
		es 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	\$	71,997.
P	art I	Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instruction	s for Pai	
	1	Contributions, gifts, grants, and similar amounts received	1	533.
	2	Program service revenue including government fees and contracts	2	45 500
	3	Membership dues and assessments	3	45,580.
	4	Investment income	4	14,885.
	5a	Gross amount from sale of assets other than inventory 5a 4,569.		
	b	Less: cost or other basis and sales expenses STMT 4 5b 2,645.	7 1	1 004
4.	C	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach schedule)	5c	1,924.
a E	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here		
Revenue	a	Gross revenue (not including \$ of contributions		
ď	١.	reported on line 1) 6a	1	
	þ	Less: direct expenses other than fundraising expenses [6b]	ا ۾ ا	
	_C	Net income or (loss) from special events and activities (Subtract line 6b from line 6a) Gross sales of inventory, less returns and allowances 7a	6c	
	7a	Gross sales of inventory, less returns and allowances Less: cost of goods sold 7a 7b	1	
	b	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7 _c	
	8	Other revenue (describe NOYALTIES	8	6,430.
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	69,352.
	10	Grants and similar amounts paid (attach schodule) CEIVED STMT 7 STMT 5	10	46,912.
	11		11	85.
Ś	12	101	12	1,925.
enses	13	Salaries, other compensation, and employee benefits Professional fees and other payments to more pengent contractors Occupancy, rent, utilities, and maintenance	13	850.
Expe	14	Occupancy, rent, utilities, and maintenance?	14	
Ш	15	Printing, publications, postage, and shipping Other expenses (describe SEE STATEMENT 1)	15	2,692.
	16	Other expenses (describe SEE STATEMENT 1)	16	3,710.
	17	Total expenses Add lines 10 through 16	17	56,174.
S	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	13,178.
set	19	Net assets or fund balances at beginning of year (from line 27, column (A))		1 41 467
Net Assets		(must agree with end-of-year figure reported on prior year's return)	19	141,467. <3,460.>
Š	20	Other changes in net assets or fund balances (attach explanation) SEE STATEMENT 6	20	151,185
_	21	Net assets or fund balances at end of year. Combine lines 18 through 20 Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form	21 990-E7	
P	art II	Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form (See the instructions for Part II.) (A) Beginning of year		(B) End of year
00	Coo	10.016		25,860.
22		an, our ingo, and in comment	23	23,0001
23 24		nd and buildings ler assets (describe SEE STATEMENT 2) 165,724		165,868.
25		ial assets 183,934		191,728.
26		al liabilities (describe SEE STATEMENT 3) 42,467		40,543.
27		t assets or fund balances (line 27 of column (B) must agree with line 21) 141, 467	7 . 27	151,185.
	171 17-08	LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.		Form 990-EZ (2008)

Forr	n 990-EZ (2008) DOUGLAS COUNTY FARM BUREA	.U		93-	60281	07 Page 2
Pá	art III Statement of Program Service Accomplishmen		Part III.)		Ex	penses
Wha	at is the organization's primary exempt purpose? SEE STATEMENT	9	· · ·		(Required	for 501(c)(3)
-	cribe what was achieved in carrying out the organization's exempt purposes. In		scribe the services			ganizations and) trusts; optional
	rided, the number of persons benefited, or other relevant information for each pr		301 100 (110 301 71003		for others.	
-	TO PROMOTE AGRICULTURE AND FORESTRY		OINTY BY		1	·
20	SUPPORTING AGRICULTURAL STUDENTS AN		OUNII DI			
	SUPPORTING AGRICULTURAL STUDENTS AN	ID PARMID.				
	0.075 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				00.	EC 174
	(Grants \$ 8,075.) If this amount includes foreign of	grants, check here		<u> </u>	28a	56,174.
29						
	(Grants \$) If this amount includes foreign of	grants, check here	>	<u> </u>	29a	
30	·					
	(Grants \$) If this amount includes foreign (prants, check here	•	abla	30a	
21	Other program services (attach schedule)					
٠.	(Grants \$) If this amount includes foreign of	arants chack here			31a	
00	Total program service expenses (add lines 28a through 31a)	grants, check here			32	56,174.
32 D	art IV List of Officers, Directors, Trustees, and Key E	mnlovees		(0 4)-		
	art IV List of Officers, Directors, Trustees, and Rey L	List each one ev	en it not compensated			1.
		(b) Title and average hours	(c) Compensation		ontributions employee	(e) Expense
	(a) Name and address	per week devoted to	(If not paid, enter		fit plans &	account and
	• ,	position	-0)	d	eferred	other allowances
				com	pensation	
RI	CHARD HOLCOMB	PRESIDENT				
OA	KLAND, OREGON	5.00	0.		0.	0.
	ASON HENDERSON	VICE PRESIDEN	T			
	SEBURG, OREGON	2.00	0.		0.	0.
	DLLY MICHAELS	WOMEN'S CHAIR				_
	SEBURG, OREGON	2.00	0.		0.	0.
_	LEN WILLIAMS	SECRETARY				
	SEBURG, OREGON	2.00	600.		0.	0.
			000.		<u> </u>	0.
	OGER COLLIS	TREASURER	•		^	
	SEBURG, OREGON	2.00	0.		0.	0.
	KE WETHERELL	DIRECTOR	•		•	
	SEBURG, OREGON	2.00	0.		0.	0.
	ROY MICHAELS	DIRECTOR	_			_
RC	SEBURG, OREGON	2.00	0.		0.	0.
LA	ARRY WILLIAMS	DIRECTOR				
RC	SEBURG, OREGON	2.00	0.		0.	0.
LI	NDA BRALEY	DIRECTOR				
	SEBURG, OREGON	2.00	0.		0.	0.
_	CK EPP	REGION 16 DIR	ECTOR			
	OSEBURG, OREGON	2.00	0.		0.	0.
_	ON KRUSE	EX-OFFICIO				
	OSEBURG, OREGON	2.00	0.		0.	0.
ĸζ	SEBURG, OREGON	2.00	<u> </u>			
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832	172 17-08	<u> </u>		-	Form	990-EZ (2008)
12-1	17-08				1 01111	(2000)

Pa	ort V Other Information (Note the statement requirements in the instructions for Part VI)			
			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	33		Х
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	34		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.		<u> </u>	
a	Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy			
	tax requirements?	35a		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b	N/	A
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Sch. N	36_		X
37 a	Enter amount of political expenditures, direct or indirect, as described in the instructions.			
b	Did the organization file Form 1120-POL for this year?	37b		X
38 a	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?	38a		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b N/A			
39	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on line 9 39a N/A	1		
b	Gross receipts, included on line 9, for public use of club facilities 39b N/A			
40 a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:			
	section 4911 \blacktriangleright N/A; section 4912 \blacktriangleright N/A; section 4955 \blacktriangleright N/A			
b	Section 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	N/	A
C	Enter amount of tax imposed on organization managers or disqualified persons during the year under			
	sections 4912, 4955, and 4958			
	Enter amount of tax on line 40c reimbursed by the organization			
е	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			-
42 a	The books are in care of \triangleright ROGER COLLIS Telephone no. \triangleright (541)			24
	Located at ► 2115 SAN SOUCI DR, ROSEBURG OR ZIP+4 ► 9	14/	0	
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority		Vaa	l Nia
	over a financial account in a foreign country (such as a bank account, securities account, or other financial		res	No
	account)?	42b		X
	If "Yes," enter the name of the foreign country:			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	40-		v
С	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c	L	<u> </u>
	If "Yes," enter the name of the foreign country:			
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		
	and enter the amount of tax-exempt interest received or accrued during the tax year	N/A	•	
			Yes	No
44	Did the excentration maintain any denor adviced funds 2 if "Vee " Form 000 must be completed instead of		163	110
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of	44		x
45	Form 990-EZ Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be	44		<u> </u>
45		45		x
	completed instead of Form 990-EZ		90-F7	(2008)
				,/

Sign Here	Order penalties of period, I declare that I have examined this return, including accompanying schedules and statements, and to the becomet, and complete. Declaration of prepare (other than officer) is based on all information of which preparer has any knowledge Signature of officer Type of print name and title.	Date
Paid Preparer's	Preparer's signature Sure Clan CPA Date 8/10 Check if self-employed	Preparer's Identifying Number (See Instr)
Jse Only	Him's name (or yours WICKS EMMETT LLP	EIN >
	if setf-employed), address, and ZIP+4 ROSEBURG, OREGON 97470	Phone 541-673-4423
May the IRS	discuss this return with the preparer shown above? See instructions	▶ Yes N

Form 990-EZ (2008)

FORM, 990-EZ	OTHER EXPENSES		STATEMENT	1
DESCRIPTION			AMOUNT	
CONVENTIONS, MEETINGS, TRAVEL DUES MISC EXPENSE INVESTMENT FEES Y.F.& R. MEETINGS			30	24. 10. 05. 03. 0. 68.
TOTAL TO FORM 990-EZ, LINE 16			3,7	10.
FORM 990-EZ	OTHER ASSETS		STATEMENT	2
DESCRIPTION		BEG. OF YEAR	END OF YEA	AR
INVESTMENTS HELD FOR SALE @ FAIR MORTGAGE RECEIVABLE	R VALUE	65,022. 100,702.		
TOTAL TO FORM 990-EZ, LINE 24		165,724.	165,8	68.
FORM 990-EZ	OTHER LIABILITIES		STATEMENT	3
DESCRIPTION		BEG. OF YEAR	END OF YEA	AR
DEFERRED GAIN ON SALE OF BUILDIN	NG	42,467.	40,5	43.
TOTAL TO FORM 990-EZ, LINE 26		42,467.	40,5	43.

FORM. 990-EZ (GAIN	(LOSS) FROM	SALE	OF OTHER	ASS	ETS		ST	ATEMENT	4
DESCRIPTION				DAT ACQUI	_	DAT:		MET)	- - -	
INSTALLMENT SALE & BUILDING	- LAN	TD.		08/01	./90	12/31	/04	PURC	HASED	
NAME OF BUYER		GROSS SALES PRICE		r OR BASIS		ENSE SALE	DEP	REC	NET GAIN	
		4,569.		2,645.		0.		0.	1,92	24.
TO FORM 990-EZ, L	INE 5	4,569.		2,645.		0.		0.	1,92	24.

FORM, 990-EZ	PAYMENTS TO	O AFFIL	IATES	STATEMENT	5
AFFILIATE'S NAME		AFF	ILIATES ADDRESS		
OREGON FARM BUREAU			5 COMMERCIAL STREET EM, OREGON	r se, ste 11	7
PURPOSE OF PAYMENT				AMOUNT	
AFFILATE DUES				38,8	37.
TOTAL INCLUDED ON FORM 990	-EZ, LINE 10			38,8	37.
FORM 990-EZ OTHER CHANG	ES IN NET AS	SETS OR	FUND BALANCES	STATEMENT	6
DESCRIPTION				AMOUNT	
UNREALIZED LOSSES				<3,4	60 •:
TOTAL TO FORM 990-EZ, LINE	20			<3,4	60.

FORM, 990-EZ CASH GRANTS AND ALLOC	CATIONS	STATEMENT 7
CLASS OF ACTIVITY/DONEE'S NAME AND ADDRESS	DONEE'S RELATIONSHIP	TUUOMA
STUDENT SCHOLARSHIP OREGON STATE UNIVERSITY	NONE	1,000.
CORVALLIS, OR 97331		
STUDENT SCHOLARSHIP TEXAS A&M UNIVERSITY	NONE	1,000.
AUSTIN, TX 77843		
CONTRIBUTION OREGON FARM BUREAU FEDERATION	AFFILIATED	575.
SALEM, OR 97302		
CONTRIBUTION UMPQUA DISTRICT - FAA TRAINING	NONE	500.
ROSEBURG, OR 97470		
STUDENT SCHOLARSHIP WESTERN OREGON UNIVERSITY	NONE .	1,000.
MONMOUTH, OR 97361	·	
STUDENT SCHOLARSHIP UNIVERSITY OF IDAHO	NONE	1,000.
MOSCOW, ID 83844		
STUDENT SCHOLARSHIP UMPQUA COMMUNITY COLLEGE	NONE	2,000.
ROSEBURG, OR 97470		
STUDENT SCHOLARSHIP DORT COLLEGE	NONE	1,000.
SIOUX CENTER, IA 51250		
TOTAL INCLUDED ON FORM 990-EZ, LINE 10		8,075.

FORM, 990-EZ	M. 990-EZ INFORMATION REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS				STATEMENT			
DIRECTLY OF	ANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL TRACT?	ι]	YES	[X]	NO		
	ANIZATION, DURING THE YEAR, PAY PREMIUMS, INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT? .	. []	YES	[X]	NO		

990-EZ PG 2

STATEMENT 9

TO PROMOTE AGRICULTURE AND FORESTRY IN DOUGLAS COUNTY, OREGON