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990Form
Department of the Treasury
Internal Revenue Service**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)

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

OMB No 1545-0047

2008Open to Public
Inspection**A For the 2008 calendar year, or tax year beginning 11/01/08, and ending 10/31/09**

<input type="checkbox"/> Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization		D Employer identification number	
		MONTGOMERY COUNTY FARM BUREAU INCOR		52-0612186	
		Doing Business As			
		Number and street (or P O box if mail is not delivered to street address)		Room/suite	
		5925 DAMASCUS ROAD			
		City or town, state or country, and ZIP + 4		MD 20882	
F Name and address of principal officer					

I Tax-exempt status 501(c) (5) ► (insert no) 4947(a)(1) or 527J Website: ► **N/A**K Type of organization Corporation Trust Association Other ► L Year of formation **1923** M State of legal domicile **MD****Part I Summary**

1 Briefly describe the organization's mission or most significant activities
TO SUPPORT AGRICULTURE IN THE COUNTY AND STATE OF MARYLAND

2 Check this box ► if the organization discontinued its operations or disposed of more than 25% of its assets

3 Number of voting members of the governing body (Part VI, line 1a)

4 Number of independent voting members of the governing body (Part VI, line 1b)

5 Total number of employees (Part V, line 2a)

6 Total number of volunteers (estimate if necessary)

7a Total gross unrelated business revenue from Part VIII, line 12, column (C)

b Net unrelated business taxable income from Form 990-R line 34 **RECEIVED**

Activities & Governance	8 Contributions and grants (Part VIII, line 1h)	9 Program service revenue (Part VIII, line 2g)	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	Prior Year	Current Year
						3	4
			158	OCT 04 2010	IRS OSC	544	652
						4,855	71
						79,090	
						84,489	89,099
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)					600	1,000
	14 Benefits paid to or for members (Part IX, column (A), line 4)					25,192	27,340
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)					25,792	28,340
	16a Professional fundraising fees (Part IX, column (A), line 11e)					58,697	60,759
	b Total fundraising expenses (Part IX, column (D), line 25) ►					Beginning of Year	End of Year
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)					274,497	341,249
	18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)						
	19 Revenue less expenses Subtract line 18 from line 12					274,497	341,249
Net Assets or Fund Balances	20 Total assets (Part X, line 16)						
	21 Total liabilities (Part X, line 26)						
	22 Net assets or fund balances Subtract line 21 from line 20						

Part II Signature Block

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge		
	<i>George E. Lechler, President</i>	<i>George E. Lechler, President</i>	<i>9-21-2010</i>
Signature of officer		Date	
Type or print name and title			

Paid Preparer's Use Only	Preparer's signature ►	Gary Purcell	Date	9/21/10	Check if self-employed ► <input type="checkbox"/>	Preparer's identifying number (see instructions)	P00749943
	Firm's name (or yours if self-employed), address, and ZIP + 4 ►	Gary R. Purcell Accounting, Inc. 1608 King St Beaufort, SC 29902-4854			EIN ► 52-2180715	Phone no ► 843-379-5287	

May the IRS discuss this return with the preparer shown above? (see instructions)

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

Yes No
Form 990 (2008)

9

Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission

TO SUPPORT AGRICULTURE IN THE COUNTY AND STATE OF MARYLAND

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

 Yes No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

 Yes No

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses
Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 24,361 including grants of \$) (Revenue \$)

GENERAL SUPPORT TO THE AGRICULTURE COMMUNITY THROUGH SCHOLARSHIP, GRANTS AND SPONSORSHIPS

4b (Code) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ► \$ 24,361 (Must equal Part IX, Line 25, column (B))

Part IV Checklist of Required Schedules

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A

2 Is the organization required to complete Schedule B, Schedule of Contributors?

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

4 **Section 501(c)(3) organizations.** Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II

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

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

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

8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III

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

10 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V

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, VIII, IX, or X as applicable

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

13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the U S ?

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

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

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

17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I

18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II

19 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III

20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H

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

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

23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J

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 24b-24d and complete Schedule K. If "No," go to question 25

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?

25a **Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I

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

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

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

	Yes	No
1		X
2		X
3		X
4		
5		X
6		X
7		X
8		X
9		X
10		X
11		X
12		X
13		X
14a		X
14b		X
15		X
16		X
17		X
18		X
19		X
20		X
21		X
22		X
23		X
24a		X
24b		
24c		
24d		-
25a		
25b		
26		X
27		X

Part IV Checklist of Required Schedules (continued)

28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee

- a 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 (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV
- b Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV
- c 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

29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M

30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M

31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II

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

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

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

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

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

	Yes	No
28a		X
28b		X
28c		X
29		X
30		X
31		X
32		X
33		X
34		X
35		X
36		
37		X

Part V Statements Regarding Other IRS Filings and Tax Compliance

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 1a

1b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a

b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)

3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 3a

b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3b

4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a

b If "Yes," enter the name of the foreign country ►
 See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts

5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a

b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b

c If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5c

6a Did the organization solicit any contributions that were not tax deductible? 6a

b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b

7 **Organizations that may receive deductible contributions under section 170(c).**

a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75? 7a

b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b

c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c

d If "Yes," indicate the number of Forms 8282 filed during the year 7d

e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e

f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f

g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g

h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7h

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

9 **Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.**

a Did the organization make any taxable distributions under section 4966? 9a

b Did the organization make a distribution to a donor, donor advisor, or related person? 9b

10 **Section 501(c)(7) organizations.** Enter

a Initiation fees and capital contributions included on Part VIII, line 12 10a

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b

11 **Section 501(c)(12) organizations.** Enter

a Gross income from members or shareholders 11a

b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11b

12a **Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041? 12a

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b

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

For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions

	Yes	No
1a Enter the number of voting members of the governing body	1a	
b Enter the number of voting members that are independent	1b	
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	X
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	X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	X
5 Did the organization become aware during the year of a material diversion of the organization's assets?	5	X
6 Does the organization have members or stockholders?	6	X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	X
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a The governing body?	8a	X
b Each committee with authority to act on behalf of the governing body?	8b	X
9a Does the organization have local chapters, branches, or affiliates?	9a	X
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	
10 Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X
11 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	X

Section B. Policies

	Yes	No
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	
13 Does the organization have a written whistleblower policy?	13	X
14 Does the organization have a written document retention and destruction policy?	14	X
15 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		
a The organization's CEO, Executive Director, or top management official?	15a	X
b Other officers or key employees of the organization?	15b	X
Describe the process in Schedule O (see instructions)		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	X
b 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?	16b	

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► **None**

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply

Own website Another's website Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►

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 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 compensate any officer, director, trustee, or key employee.

Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)**

1b Total

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ► 0

3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization ►

0 ~~666~~

Part VIII Statement of Revenue

		(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	1a Federated campaigns	1a					
	b Membership dues	1b	88,376				
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f					
	g Noncash contributions included in lines 1a-1f		\$				
	h Total. Add lines 1a-1f		►	88,376			
Program Service Revenue	2a BANQUET	Busn. Code					
		b		652	652		
		c					
		d					
		e					
		f All other program service revenue					
		g Total. Add lines 2a-2f		►	652		
		3 Investment income (including dividends, interest, and other similar amounts)		►	71		71
4 Income from investment of tax-exempt bond proceeds		►					
5 Royalties		►					
6a Gross Rents	(i) Real	(ii) Personal					
b Less rental exps							
c Rental inc or (loss)							
d Net rental income or (loss)		►					
7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other					
b Less cost or other basis & sales exps							
c Gain or (loss)							
d Net gain or (loss)		►					
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c)							
See Part IV, line 18	a						
b Less direct expenses	b						
c Net income or (loss) from fundraising events		►					
9a Gross income from gaming activities							
See Part IV, line 19	a						
b Less direct expenses	b						
c Net income or (loss) from gaming activities		►					
10a Gross sales of inventory, less returns and allowances	a						
b Less cost of goods sold	b						
c Net income or (loss) from sales of inventory		►					
Miscellaneous Revenue	Busn. Code						
11a							
b							
c							
d All other revenue							
e Total. Add lines 11a-11d		►					
12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e		►	89,099	652	0	71	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 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				
3 Grants and other assistance to governments, organizations, and individuals outside the U S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,000		1,000	
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	460		460	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other	19,002	17,661	1,341	
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	1,153		1,153	
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	6,700	6,700		
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	25		25	
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)				
a				
b				
c				
d				
e				
f All other expenses				
25 Total functional expenses Add lines 1 through 24f	28,340	24,361	3,979	
26 Joint Costs. Check here ► <input type="checkbox"/> 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				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year	
Assets	1 Cash—non-interest bearing	63,115	1	73,875	
	2 Savings and temporary cash investments	211,382	2	267,374	
	3 Pledges and grants receivable, net		3		
	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 Part II of Schedule L		6		
	7 Notes and loans receivable, net		7		
	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	10b		10c	
	11 Investments—publicly traded securities			11	
	12 Investments—other securities See Part IV, line 11			12	
	13 Investments—program-related See Part IV, line 11			13	
	14 Intangible assets			14	
15 Other assets See Part IV, line 11			15		
16 Total assets. Add lines 1 through 15 (must equal line 34)		274,497	16	341,249	
Liabilities	17 Accounts payable and accrued expenses			17	
	18 Grants payable			18	
	19 Deferred revenue			19	
	20 Tax-exempt bond liabilities			20	
	21 Escrow account liability Complete Part IV of Schedule D			21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			22	
	23 Secured mortgages and notes payable to unrelated third parties			23	
	24 Unsecured notes and loans payable			24	
	25 Other liabilities Complete Part X of Schedule D			25	
	26 Total liabilities. Add lines 17 through 25			26	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27 Unrestricted net assets		274,497	27	341,249
	28 Temporarily restricted net assets			28	
	29 Permanently restricted net assets			29	
	Organizations that do not follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 30 through 34.				
	30 Capital stock or trust principal, or current funds			30	
	31 Paid-in or capital surplus, or land, building, or equipment fund			31	
	32 Retained earnings, endowment, accumulated income, or other funds			32	
	33 Total net assets or fund balances		274,497	33	341,249
	34 Total liabilities and net assets/fund balances		274,497	34	341,249

Part XI Financial Statements and Reporting

1 Accounting method used to prepare the Form 990. Cash Accrual Other

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

b Were the organization's financial statements audited by an independent accountant?

c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

b If "Yes," did the organization undergo the required audit or audits?

	Yes	No
2a	<input checked="" type="checkbox"/>	
2b	<input checked="" type="checkbox"/>	
2c		
3a		
3b		

MONTGOMERY COUNTY FARM BUREAU OFFICERS AND DIRECTORS

2008-2010

FIRST NAME	LAST NAME	STREET	CITY AND STATE	ZIP	HOME#	OFFICE#	CELL#	E-MAIL
George	Lechider	24110 Laytonsville Road	Gaithersburg, MD	20882	301-253-1501	301-253-8867	240-750-7777	thelecksfarm@aol.com
Lorraine	Luther	28711 Clarkburg Road	Damascus, MD	20872	301-253-6084	240-276-8280	301-642-8583	LonnieLuther@FDA.HHS.GOV
Pam	Saul	3031 Mt Carmel Cemetery Rd.	Brookville, MD	20833	301-774-3333	301-520-3937	70msaul@verizon.net	
William	Anderson	9120 Edgewood Drive	Gaithersburg, MD	20878	301-926-0233			2nd Vice President
Vince	Berg	7610 Moccasin Lane	Rockville, MD	20855	301-253-0200	301-257-8362	301-977-2129	bergv@erols.com
Butler	Susan	22200 Davis Mill Rd.	Germantown, MD	20876	301-253-9088	301-428-0444		Poolsville/Barnsville
Connelly	Bruce	25327 Burnt Hill Rd.	Clarksburg, MD	20871	301-253-0654			#12 Damascus
Cris	Jeremy	18410 Muncaster Rd.	Derwood, MD	20855	301-590-9638	301-943-9786	301-943-9786	#9 Gaithersburg
Evans	Jane Griffith	6001 Griffith Rd.	Laytonsville, MD	20882	301-253-9449	301-502-2729	jeremycriss@montgomerycountymd.gov	DED - Ag. Services
Fendrick	John	21000 Blunt Rd	Germantown, MD	20876	301-947-4541	301-428-7620	onthevera@aol.com	Laytonsville/Brookville
Greenstone	Todd	1620 Eagle's Ridge Rd.	Brookville, MD	20833	301-774-6289	301-370-3566	fendrick@woodbournesolutions.com	At Large
Hamm	Henry	24101 Frederick Rd.	Clarksville, MD	20871	301-972-3222			#5 Colesville
Hanson	Robert	14100 Quince Orchard Rd.	Gaithersburg, MD	20878	301-762-5676			#11 Barnesville
Hartsack	Thomas	25518 Brunt Hill Rd.	Clarksville, MD	20871	301-253-9528	301-253-9528	ligh@umd.edu	Rockville
Hunt	Timothy	12304 Prices Distillery Rd.	Damascus, MD	20872	301-253-4576			Laytonsville/Damascus
Irons	Edward	22424 Goshen School Rd.	Laytonsville, MD	20882	301-391-6023			At Large
Linthicum	Charles Thomas	22310 Laytonsville Rd.	Laytonsville, MD	20882	301-391-6091	240-398-0122	senecaavfarms@adelphia.com	#2 Clarkburg
Schuster	Chuck	18410 Muncaster Rd.	Derwood, MD	20855	301-259-2807	410-598-2159	cts@umd.edu	Damascus
Smith	Robert E. L.	17028 Barn Ridge Dr.	Silver Spring, MD	20808	301-774-9860			#1 Laytonsville
Spates	Eric	Box 562, 21111 Westerly Rd.	Poolsville, MD	20837	301-428-8033	301-319-2568	301-461-0722	#3 Poolsville
Tregoning	Doug	18410 Muncaster Rd.	Derwood, MD	20855	301-590-9638			Director/Extension
Lechider	Robin S.	5925 Damascus Rd	Laytonsville, MD	20882	301-253-6672	301-758-1244	robin@sunmyndefarm.net	Treasurer
Lechider	Carolyn	24110 Laytonsville Rd.	Gaithersburg, MD	20882	301-253-1501	301-251-6841	thelecksfarm@aol.com	Secretary & W.L. Chair
Lechider	Kim	5925 Damascus Rd.	Laytonsville, MD	20882	301-253-8672	301-467-1419	klechid@umd.edu	Co-Chair Young Farmers
Butler	Tyler	22440 David Mill Rd.	Germantown, MD	20876	301-916-5294		tylerbullet@gmail.com	Co-Chair Young Farmers
Ruthman	Laura	5233 Hanover Pike	Manchester, MD	21101	410-374-2324	410-374-2324	LauraR.MDFB@Verizon.net	MFB Area Director
Burke	John	22717 Woodfield Rd.	Gaithersburg, MD	20882	301-253-6264			Honorary Director
King	Doug	11411 Kingsted Rd.	Damascus, MD	20872	301-253-4032			Honorary Director