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				1	Deturn	of Organiz	ation Exemp	t From Incom	e Tax		OMB No.	1545-0047
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•		į,	(7	Į u	nder section 501	• • • •		ternal Revenue Code	(except bla		<u> </u>	000
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	Internal	Revenu	Service	<u> </u>			a copy of this retu	rn to satisfy state repo			F0000000000000000000000000000000000000	Setting COD
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⊇ ່	^	ppicatio	n pending	F Name	and address of principal	officer:	,		H6	Is this a group re affiliates?	turn for	Yes VI No
∩107	7	ıx-exem	pt status:	5016) (5) ◀ (inser	t no.) 4947(a)	(1) or 527		Hes	Are all affiliates	included?	Yes No
ည	, 1	ebuite:							H(c		list. (see instructions number)
72			ganization:	Corporation	Trust Ass	ociation Other	>	L. Year of formation:		M State of lega	domicile: Ke	Jirky
JAN			Summary							10-T'		1 /orTh
		'	OCT i v	·	_ 2 2	n or most signific	ant activities:	Promoting a gricult				YOUTH
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S	r	2		_	-		•	ed of more than 25%	of its assets	i. ,	1	
M		3		_	_	ing body (Part Vi		••••••	• • • • •	_3		
1600) :	: Б с	5			voung members overs (Part V, line		oody (Part VI, line	16)	• • • • •			60
~ T	e c	6		_	ers (estimate if ne					6		
•		7a				om Part VIII, line	_			7	a	
		Ь	Net unrelated	business t	axable income fro	m Form 990-T, l	ine 34	· · · · · · · · · · · · · · · · · · ·	<u></u>	7	Ь	
	R								P	rior Year	Curren	t Year
	e V	8		•	s (Part VIII, line i e (Part VIII, line i	•	• • • • • • • • • •	• • • • • • • • •	٠	521.2		aro
,	e D	10	-			2g)			•	<u> </u>	7	N39
4	u c	11				95 6d. 8c, 9c,			. 58	496	53	1084
禹		12	Total revenue	- add line	8 through 11 (m	ust equal Part VII	I, column (A), line		. 58	2.877	61	083
145		13	Grants and sir	milar angu	ints paid (Part IX,	column (A)	s 1-3)		8	, 750		050
ď	E	15	Benefits paid	to or form	embersi@aft (X.,	Colligna (4) Qine	4)		·	. 200	· · · · · ·	800
書	P					unn (A), line 11	olumn (A), lines 5	-10)	. 4	,200	-4,	X00
ナ		ь	Total fundrais	ing expens	es (Part IX, colum	nn (D), line 25)	<i>,</i>	• • • • • • • • • •				
ф	ċ					s 11a-11d, 11f-24	if)		. 7	0.357	3 26	739
半	•	18	-			uai Part IX, colu	mn (A), line 25)		· 🔼 🎖	3,30	3 42	, 589
麦		19	Revenue less	expenses.	Subtract line 18 f	rom line 12	• • • • • • • •		· K_2	4,424	3 18	, 494
	/23C(2	20	Total assets (F	Part X. line	: 16)				Regiui	ning of Year	End of	112
₹ <u>*</u>	i Send	21	Total liabilities			· · · · · · · · · · ·			.	9,07	1 300	7)-
\ 3	10ES	22	Net assets or i	fund baland	ces. Subtract line	21 from line 20		• • • • • • • • •	. 44	19.64	7 468	1103
	Past		Signature									
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9	Here Employed		Signature	of officer	is f	I MIN	 	_ 			1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	010_
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_	63		Type or p	ant name and	itle							
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	'aid5 'regar	er's	signature V		mean	1/0	9	7-6-2010	ngloyed D			
	ig o		Firm's name (or if self-employed)		RID	Ocea.	Jing		EIN	* 33	-1140	138
	芝	•	address, and ZII		207 20	DUT ST.	Prestonsh	DEC KY 414	S Phone n			<u> </u>
Ī	viayrti	e IRS	discuss this re	turn with t	the preparer show	n above? (see inst				· · · · · · ·	Ye	s 🗌 No
Ī	of Pr	vacy	Act and Paper	work Redu	ction Act Notice	, see the separate	instructions.		$\overline{)}$	EEA	Forn	n 990 (2008)
	-,											So

	Statement Statement	of Program Sei	rvice Accomplishi	ments (see in	structions)			
1	Briefly describe the o	rganization's mission	on:	· · · · · · · · · · · · · · · · · · ·			11 11 0	
	Fromot	ing Ed	ucationa	1 and 40	oth activ	ities i	7 4-4 hu	<u>egrams</u>
	and ag	<u>ric^oulT</u> u	oral activ	rities.				
)		_ 				
2	Did the organization	undertake any signi	ficant program service	s during the year whic	h were not listed on			
					. .		🗌 Yes 💆 1	No
	If "Yes," describe the							
3	Did the organization	cease conducting, o	or make significant cha	nges in how it conduct	s, any program			
	services?						🗌 Yes 🔞 1	Ųо
	If "Yes," describe the							•
4	Describe the exempt	purpose achievemen	nts for each of the orga	nization's three larges	t program services by ex	penses.		
	Section 501(c)(3) and	501(c)(4) organiza	tions and section 4947	(a)(1) trusts are requin	ed to report the amount o	of grants and		
	allocations to others,	the total expenses,	and revenue, if any, fo	or each program servic	e reported.			
	Schedule	ATTach	ed					
4 a	(Code:) (Expenses \$		including grants of	\$) (Revenue	\$)
					·			
			<u></u> ,	<u> </u>				
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4b	(Code:) (Expenses \$		including grants of	\$) (Revenue	\$	
								
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			<u> </u>	·				
			·		 			
4 c	(Code:) (Expenses \$		including grants of	\$) (Revenue	\$)
			· · · · · · · · · · · · · · · · · · ·			<u> </u>		
								
								
								
					 			
					<u>-</u> -			
4d	Other program service	es. (Describe in Sch		_				
	(Expenses \$		including grants of) (Revenue \$)	
<u>4e</u>	Total program service	e expenses 🕨	\$	(Must equal P	art IX, Line 25, column	(B).)		

Form 990 (2008)

Page 2

	990 (2008)		F	age 3
Par	Checklist of Required Schedules		Ι	
	704 / VO) 4047 / VO) 4047 / VO) 4047 VO) 4		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	1		1
	complete Schedule A	2		7
2	TO BILD OF PERMITTED TO SOFT P		-	
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		V
4	candidates for public office? If "Yes," complete Schedule C, Part I	-		
*	Schedule C, Part II	4		V
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
3	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	ļ	1
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to			
U	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete			
	Schedule D, Part I	6	ļ	V
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		\ \
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
•	complete Schedule D, Part III	8		1
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,"			1
	complete Schedule D, Part IV	9	ļ	1
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		7
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,			
• •	Parts VI, VIII, IX, or X as applicable	11	7	
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		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		V
Ь	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		
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		マ
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	1	V
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		
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	7	
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		7
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete			
	Schedule J	23		>
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	24a		V
Ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		1
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?	24c		<u>\</u>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		V
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			l
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
Ь	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		<u>\</u>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			١. ١
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		<u>\</u>
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	L	7

Checklist of Required Schedules (continued)

			Yes	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			
	(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			/////
	Part IV	28a		/
ь	Have a family member who had a direct or indirect business relationship with the organization? If "Yes,"			
	complete Schedule L, Part IV	28b		<u>\</u>
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	28c		V
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		>
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		V
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			7
	VI	37		
			·	

Form 990 (2008)

	Statements Regarding Other IRS Filings and Tax Compilance			
			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			
Ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			₩
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			***
	gaming (gambling) winnings to prize winners?	1c	N\\	<u> </u>
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?	2ь		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see			₩
	instructions)			~
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			***
	this return?	3a		<u>~</u>
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3ь		<u>v</u>
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority		1	
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial		\downarrow	
	account)?	4a		v —
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.			Ŵ¢.
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		4
Ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		V
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		7
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).			
3	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a		<u>/</u>
Ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7ь		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		<u> </u>
d	If "Yes," indicate the number of Forms 8282 filed during the year			
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		<u></u>
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	NAG	7
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
_	required?	7h		4
В	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		1
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	`	<u>\</u>
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		V
0	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			W
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 61,083			
l	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders			
Þ	Gross income from other sources (Do not net amounts due or paid to other sources against			Ä.
ο-	amounts due or received from them.)	###		₩,
za	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 900 in liqu of Form 10412	192	- I >	

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

12b

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

<u> </u>	NOTE A. COVERING DOGY and a sundpension			_
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the	Y	es No	
	circumstances, processes, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body			*
b	Enter the number of voting members that are independent			
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
2		2		900
	any other officer, director, trustee, or key employee?		+-	_
3	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		i
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		_
4	Did the organization become aware during the year of a material diversion of the organization's assets?	5	\ <u>`</u>	_
5		6	, `	
6 7-	Does the organization have members or stockholders?	 • •	_	_
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	7a 🔨	.	
_	of the governing body?		.	—
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	70	•	*
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			*
_	the year by the following:	92	•	**
a	The governing body?	Oa	-	_
Þ	Each committee with authority to act on behalf of the governing body?	8b		
9a	Does the organization have local chapters, branches, or affiliates?	9a	+	
Ь	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	- `	_
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at			4
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		_
<u>Seci</u>	tion B. Policies			_
		Y	es No	<u> </u>
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	_	_
Ь	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b		_
C				
	describe in Schedule O how this is done	12c		_
13	Does the organization have a written whistleblower policy?	13		_
14	Does the organization have a written document retention and destruction policy?	14		5555°
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		_
Ь	Other officers or key employees of the organization?	15b		
	Describe the process in Schedule O. (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			*
	with a taxable entity during the year?	16a		
b	If "Yes," 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		
Sect	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			_
18	Section 6104 requires an organization to make its Forms 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			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
	Describe in Schedule C whether (and it so, now), the organization makes its governing documents, connect of interest			
	policy, and financial statements available to the public.			
20	policy, and financial statements available to the public.			
20	policy, and financial statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records of the	e-886	-ጽሩ	97

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.

(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average	Position (check all that apply)						Reportable compensation	Reportable compensation	Estimated
Schedule ATTached	hours per week	I t d nri d'ur i s e v t c i e t d e o u r	I ir us stite ti on a	Officer	K e m p l o y e e	Hce iom gmp hpi eeo sny tse te d	111	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
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Section A. Officers, Directors, Trustees, Key I	Employees, a	nd Hig	hest	Cor	npen	sated	Empl	oyees (continued)		
w	(8)			(C)				(D)	œ	(F)
Name and title	Average	Positio	n (che	ck all	that			Reportable	Reportable	Estumated
	hours	apply)						compensation	compensation	amount of
	per	I t d	I t	0	Ke e m	H c e	F	from	from	other
	week	ı – ur	g r t u	f	yР	g p P	r	the	related	compensation
		i se	i s	ء ا	1 0	he l	m e	organization	organizations	from the .
		i e t	ļ e	e	у	5 5 y	r	(W-2/1099-MISC)	(W-2/1099-MISC)	organization
		u r	i e	r	e	1 1 6				and related
0 1 1 .07		a o l r	n a			d				organizations
Schedule ATTached			<u> </u>	1_	┡-		-			
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1b Total			_							
2 Total number of individuals (including those in 1a) who represent the second	eceived more	than 3	100	,000	in n	eportal	ole co	mpensation from the	ie	
organization >										Yes No
3 Did the organization list any former officer, director or to	nietee kev er	nnlove		· hial	haet e		neatar	à		169 140
employee on line 1a? If "Yes," complete Schedule J for s				_		_				3
4 For any individual listed on line 1a, is the sum of reporta									• • • • • • •	, ,
the organization and related organizations greater than \$1	_				_					
individual			_			auic J				. 4
5 Did any person listed on line 1a receive or accrue compe				ed o	roani	ization	for			
services rendered to the organization? If "Yes," complete									. 	
Section B. Independent Contractors										
1 Complete this table for your five highest compensated inc	lependent cor	ntractor	s the	at re	ceive	d mon	than	\$100,000 of		•
compensation from the organization.										-
W								(B)		(C)
Name and business address								Description of ser	VICES	Compensation
2 Total number of independent contractors (including those	in 1) who re	ceived	mor	e tha	ın \$1	00,000) in			
compensation from the organization										

Part V		Statement of Revenue				, <u></u>	
				(A) Total revenue	(B) Related or exempt function revenue	Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Cgoa of tan of ho tteu rs.rn ibssa uri tam iotl	la b c d e	Federated campaigns	1a 1b 42,788 1c 1d 1e				
a, r	g h	Noncash contributions included in lines 1: Total. Add lines 1a-1f	1f a-1f: \$	42.788			
P S R	2a e		Business Code	4,960			
g v e r i n a c u	c d e f	All other program service revenue		·			
		Total. Add lines 2a-2f		4910			
	3	Investment income (including dividends, in	iterest, and	3,039			
	5	Royalties	teal (ii) Personal				
	b b	Gross Rents		0			
	7a	Net rental income or (loss)	rities (ii) Other	9,000			
O t h	c	Less: cost or other basis and sales expenses Gain or (loss) Net gain or (loss)					
e r R e	8a	Gross income from fundraising events (not including \$	_				
e n u	b c	See Part IV, line 18	ь				
e	b	Gross income from gaming activities. See Part IV, line 19					
	10a	Net income or (loss) from gaming activities Gross sales of inventory, less returns and allowances	a				
	с	Less: cost of goods sold	y				
	b c	Refunds Incentive Check		696 600			
	e	All other revenue	▶ 6d, 7d, 8c,	1296			
		9c, 10c, and 11e		61.083	•	ļ	

Part 2 Statement of Functional Expenses

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

	All other organizations must complete column				
Do	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b.	, 8b, 9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to governments and				
•	organizations in the U.S. See Part IV, line 21	11.050	11,050		
2	Grants and other assistance to individuals in	77,000	,	7	
2	the U.S. See Part IV, line 22				
7			-		
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,	11000		11000	
	trustees, and key employees	4,800		4,860	
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				
11	Fees for services (non-employees):			-	
a	Management				
Ь	Legal				
c	Accounting	450		450	
ď	Lobbying	700		700	
е.	Professional fundraising services. See Part IV, line 17 .				
f	Investment management fees				
g	Other				
12	Advertising and promotion	2072	2.073		
13	Office expenses	2,073	2,070	608	
14	Information technology	ID CO			
15	Royalties				
16	Occupancy				
17	Travel	997	997		
18		77/	99/		
10	Payments of travel or entertainment expenses		•		
10	for any federal, state, or local public officials	12/0/12	12 843		
19	Conferences, conventions, and meetings	12,843	14,543		
20	Interest	- "		<u>. </u>	
21	Payments to affiliates		 		
22	Depreciation, depletion, and amortization	0.000	704-		
23	Insurance	3,300	3.300		
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.)			\$ - 87	
2	Taxes Property	2586	0 =	2586	
Ь	Membership tees	3504	3504		
C	Security System	336		336	
đ	Bank Fees	42		42	
е					
f	Ail other expenses			A 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	
25	Total functional expenses. Add lines 1 through 24f	42,589	33,767	8,822	
26	Joint Costs. Check here ▶ ☐ if following \	1	, , , ,		
	SOP 98-2. Complete this line only if the organization organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation · · · · · · · · · · · · · · · · · · ·	-	<u> </u>		<u>L</u>

Part		Balance Sheet				
	,		(A)		(1	3)
			Beginning of year		End of	<u> </u>
	1	Cash - non-interest-bearing	49 647	1	6	2 14 1
	2	Savings and temporary cash investments	100,000	2	0	022
	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				
	ł	Part II of Schedule L	**************************************	6	··········	**********************
A	7	Notes and loans receivable, net		7		
S	8	Inventories for sale or use		8		
ē	9	Prepaid expenses and deferred charges		9		
ţ	10a	1 1 2		·		
•						
	Ъ	Less: accumulated depreciation. Complete	370 00	10c	20	
	1	Part VI of Schedule D	300,000		30	0,000
	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)	449 647	16	468	163
	17	Accounts payable and accrued expenses	·	17		<u></u>
	18	Grants payable		18		
Ļ	19	Deferred revenue		19		·
I a	20	Tax-exempt bond liabilities		20		
Б	21	Escrow account liability. Complete Part IV of Schedule D		21		
į	22	Payables to current and former officers, directors, trustees, key	,			
i		employees, highest compensated employees, and disqualified				
t		persons. Complete Part II of Schedule L	······································	22	************	
i .	23	Secured mortgages and notes payable to unrelated third parties		23		
5	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	-0-	26		<u> </u>
	 _	Organizations that follow SFAS 117, check here	<u> </u>			
N =		complete lines 27 through 29, and lines 33 and 34.				
NF	27	Unrestricted net assets		27		
n	28	Temporarily restricted net assets		28		
, d	29	• •		29		
B B	27	Permanently restricted net assets	144	24		
a		Organizations that do not follow SFAS 117, check here ▶ □				
• [and complete lines 30 through 34.				
a	30	Capital stock or trust principal, or current funds		30		
C	31	Paid-in or capital surplus, or land, building, or equipment fund		31		
e S	32	Retained earnings, endowment, accumulated income, or other funds		32		
•	33	Total net assets or fund balances	449,647	33	468	163
	34	Total liabilities and net assets/fund balances	449 647	34	468	.163
Per		Financial Statements and Reporting				
				_		Yes No
1	Accoun	ting method used to prepare the Form 990: Cash Accrual Othe	r			(1)
2 a	Were th	ne organization's financial statements compiled or reviewed by an independent accountant?	• • • • • • •		2a	<u>~</u> [
		ne organization's financial statements audited by an independent accountant?	. 		2b	
		to lines 2a or 2b, does the organization have a committee that assumes responsibility for over	ersight of	- '		
		it, review, or compilation of its financial statements and selection of an independent accountant	=		2c	
_		sult of a federal award, was the organization required to undergo an audit or audits as set fort				-+
_		gle Audit Act and OMB Circular A-133?			3a	7
	-	" did the organization undergo the required audit or audits?		. .	3b	- -
	100	, was no organization and go no required about or audits;		• • • •		

hedul	e D'(Form 990) 2008							Page 2
Secretary.	Organizations Maintaining Collecti	ions of A	t, Historica	i Treasur	es, or Other	Similar Assets	(conti	nued)
<u>******</u> 5	Using the organization's accession and other records, ch							
	items (check all that apply):	_	_					
a	Public exhibition	d 🗌 1	Loan or exchai	ige progran	ns			
b	Scholarly research	_	Other	•				
c	Preservation for future generations		-					
,	Provide a description of the organization's collections ar	nd explain h	ow they furthe	r the organi	zation's exempt	purpose in		
_	Part XIV.	•	•	_		-		
5	During the year, did the organization solicit or receive d	lonations of	art, historical	reasures, o	r other similar			
	assets to be sold to raise funds rather than to be maintain						Yes	☐ No
	Trust, Escrow and Custodial Arran					i "Yes" to Form 990,		
	Part IV, line 9, or reported an amount on Fo	_	-	J				
l a	Is the organization an agent, trustee, custodian or other			ons or other	r assets not			
_	included on Form 990, Part X?						🗌 Yes	☐ No
ь	If "Yes," explain the arrangement in Part XIV and comp							
-						A	mount	
c	Beginning balance					1c		
d	Additions during the year					1d		
e	Distributions during the year					1e		
f	Ending balance					1f		
2a	Did the organization include an amount on Form 990, P						Yes	□No
b	If "Yes," explain the arrangement in Part XIV.							
	Endowment Funds. Complete if orga	nization ans	wered "Yes" to	Form 990	Part IV. line 10).		
diami	<u> </u>	Current Year		or Year	(c) Two Years Bac		(c) Four Yes	urs Back
la	Beginning of year balance							
ь	Contributions							
c	Investment earnings or losses							******
d	Grants or scholarships							
e	Other expenditures for facilities							•••••
	and programs							
f	Administrative expenses						7	
	End of year balance							
g	Provide the estimated percentage of the year end balance	a hold age	<u> </u>					
	Board designated or quasi-endowment							
a	Permanent endowment > %	 %						
b								
C Za								
Ja	Are there endowment funds not in the possession of the	organization	i uiat are neio	and somme	stered for the		Ye	es No
	organization by:							5 140
	(i) unrelated organizations						3a(i)	+
	(ii) related organizations						3a(ii)	-+
D	If "Yes" to 3a(ii), are the related organizations listed as	=		• • •			<u>3</u> 6	
	Describe in Part XIV the intended uses of the organizati							
Œ.	Investments - Land, Buildings, and	Equipme	ent. Se	e Form 99	0, Part X, line 10).	 	
	Description of investment	(a) Cost or			or other	(c) Depreciation	(d) Book val	ue
_		(inve	stment)	besis	(other)			
la	Land	200	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					
Ь	Buildings	<u>300</u>	,000					
c	Leasehold improvements	<u> </u>		ļ				
d	Equipment		_			-	_	
-	Other							

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

SCHEDULE I (Form 990)	Ġ	Grants and Other Governments,	nts and Other Assistance to Organizations, Governments, and Individuals in the U.S.	organizations, in the U.S.		OMB	OMB No. 1545-0047 2008
Department of the Treasury Internal Revenue Service	► Complete if t	 Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. Attach to Form 990. 	nswered "Yes," on Form 990, ► Attach to Form 990.	Part IV, lines 21 or 2:	3	6	Open to Public Imperiba
Name of the organization Heart Locky form Bureau Federation Hood Co	rm Bureau	Jederati	phant you	Co.		Property theoretics mentors	3080
Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	substantiate the amount of ants or assistance?	of the grants or assistance	assistance, the grantees' eligibility for the g	y for the grants or assistan	ance, and		. F Yes No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Grants and Other Assistance to Governments and Organizations in the United States. 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	cedures for monitoring the to Governments are recipient that received m	ne use of grant funds in the and Organizations in one than \$5,000. Check	te United States. The United States this box if no one recip	ont received mo	Complete if the organization answered "Yes" on re than \$5,000. Use	ered "Yes" on	
Part IV and Schedule I-1 (Form 990) if additional space is needed of constraints of the second address of organization (A) EIN (C)	0) if additional space is n	eeded	(d) Amount of cash grant	(c) Amount of non-cash assulance	(f) Method of valuation (book, FMV, appraisal, other)	(c) Description of non-cash assistance	(A) Purpose of grant or assistance
Scholar ships			9750				
41ad Co. Ag. Council			800				
Hard County 4th program	ξ		500				
			-				
		,					
		,					
2 Enter total number of section 501(c)(3) and government organizations 3 Enter total number of other organizations	nd government organizati	ons					
For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form	Notice, see the Instruct	lons for Form 990.		BEA			Schedule I (Rorm 990) 2008

GRANT SCHEDULE

SCHOLARSHIPS	\$9,750.00
FLOYD CO. AG. COUNCIL	800.00
FLOYD COUNTY 4-H PROGRAM	500.00
TOTAL GRANTS	\$11,050.00

FLOYD COUNTY FARM BUREAU FEDERATION

OFFICERS & BOARD MEMBERS

2009

President: Eddie Akers *

Vice President: Saul Akers *

Secretary - Treasurer: Delphia J. Hicks

Board of Directors:

Jack Friar
Dr. Mark Greene
Charles Hackworth
Billy Hicks
Donald Hicks
Delbert Martin
Fonzo Akers

Address:

1288 S. Lake Drive Prestonsburg, KY 41653 Ph: 606-886-3108

^{**}The relation between President Eddie Akers and Vice President Saul Akers is that of Father and Son.**

Board Meeting

The board of Director of Kentucky Farm Bureau Federation Floyd Co. has regularly schedule monthly board meetings, to discuss and vote on business matters concerning the organization.