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DLN: 93493319039740

Form **990**

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)

OMB No 1545-0047

Department of the Treasury

Internal	Revenue	Service	► The or	rganization may have to use a co	py of this return to satisfy s	state reporting	requirements	Inspection
A Fo	r the 2	2008 ca	lendar yea	ır, or tax year beginning 12-01-20	008 and ending 11-30-200	9	D Franksian ida	untification would be
		pplicable	Please	C Name of organization AMERICAN FARM BUREAU FEDERATI	ION		. ,	entification number
☐ Ad	dress ch	ange	use IRS label or	Doing Business As	36-0725160 E Telephone number			
∏ Na	me char	nge	print or type. See	boing business //5			•	
Initial return			Specific Instruc-	Number and street (or P O box if m	ess) Room/suite	(202) 406-: G Gross receipts		
Г Те	mınatıo	n	tions.	600 MARYLAND AVE SW No 1000W			G Gloss leceipts	33,033,000
☐ Am	nended r	return		City or town, state or country, and Z	ZIP + 4			
┌ Ap	plication	pending		WASHINGTON, DC 20024				
		Ī		ne and address of principal office	er	H(a) Is this	ı s a group return	for
				TALLMAN ARYLAND AVE SW No 1000W		affiliat	es?	┌ Yes
				INGTON, DC 20024		H(b) Are all	affiliates include	ed?
						1 ' '		(see instructions)
I Ta	x-exem	pt status	✓ 501(c) (5) ◀ (insert no)	or	H(c) Group	o exemption nur	nber 🟲
J W	ebsit e	· · ww	W FB COM	1				
К Тур	e of org	anızatıon	Corporat	tion Trust Association Other		L Year of fo	rmation 1920 M	State of legal domicile IL
Pa	rt I	Sumn	nary				<u>'</u>	
				e organization's mission or most				
	II.			FIED NATIONAL VOICE OF AG				
e e	1	COMMU		TRENGTHEN THE LIVES OF RU	JRAL AMERICANS AND TO	BUILD STRC	NG, PROSPER	OUS AGRICULTURAL
2		COMMO	INTITES					
2								
ē								
Governance	2	Check th	hıs box ► F		d its operations or disposed	of more than	25% of its asse	ets
			,	members of the governing body (34
<u>&</u>			_	ndent voting members of the gove				33
乭				nployees (Part V, line 2a)			. 5	114
Activities &				olunteers (estimate if necessary)			6	
•				ted business revenue from Part \			_	
		_		iness taxable income from Form			71	
						Prio	r Year	Current Year
	8	Contrib	outions and	d grants (Part VIII, line 1h)				0
횰	9			revenue (Part VIII, line 2g)		24,973,144	25,110,656	
Revenue	10	_		me (Part VIII, column (A), lines			1,256,845	797,882
걆	11	Otherr	evenue (P	art VIII, column (A), lines 5, 6d	, 8c, 9c, 10c, and 11e)		134,165	206,541
	12	Total re	evenue—a	dd lines 8 through 11 (must equa	al Part VIII, column (A), lır	ie		
							26,364,154	26,115,079
	13			ar amounts paid (Part IX, column				447,000
	14			or for members (Part IX, column (_		0
83	15	Salarie 10)	s, other co	ompensation, employee benefits	(Part IX, column (A), lines	5-	12,463,198	14,376,674
Expenses	16a	•	sional fund	draising fees (Part IX, column (A)), line 11e)		, ,	0
÷	ь			penses (Part IX, column (D), line 25) ▶0				
Ð	17			enses (Part IX, column (D), line 25) ►2 (Part IX, column (A), lines 11a-:			12,372,933	10,683,165
	18		•	Add lines 13-17 (must equal Pa	•		24,836,131	25,506,839
	19			penses Subtract line 18 from line			1,528,023	608,240
ቴ ያ				,		Beainni	ng of Year	End of Year
9000	20	Totala	ssete (Da	rt X, line 16)			41,714,223	39,696,274
Net Assets or Fund Balances							· · ·	· · ·
18 E	21			Part X, line 26)			4,355,024	4,691,770
	22			nd balances Subtract line 21 from	m line 20		37,359,199	35,004,504
Pa	rt II		ature Bl					
				erjury, I declare that I have examined the correct, and complete Declaration of pre-				
<u></u>	_	****		. ,	, , , , , , , , , , , , , , , , , , , ,	2010-		
Sign Here		I B	ture of office	er		Date		
	_	RICHA	ARD NEWPH	ER EXEC VICE PRESIDENT/TREASURER				
			or print nam					
		Preparer	's k		Date	Check If	Preparer's identi	
Paid		signature		NN TRAPP	2010-11-15	self- empolyed •	(see instructions	
		S Firm's n	ame (or vou	irs L BLACKMAN KALLICK LLP			+	
	Only	ıf self-employed), EIN 🕨						
	•	audress,	anu ZIP + 4		K		Phone no ► (3	312) 207-1040
M = ·	+h - TD1	٠	s this ratio	CHICAGO, IL 60606	o? (see instructions)			₩ You

art TV	Checl	clist 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		Νο
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Νο
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		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
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	Yes	
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		No
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		Νο
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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		No
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt[4]{3}$	10		No
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	11	Yes	
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	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		Νο
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		No
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		Νο
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		Νο
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		No
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		Νο
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νo
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νο
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	Yes	
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		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	Yes	
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		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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? <i>If</i> "Yes," complete Schedule L, Part 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		No
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		No

Part IV 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			
		28a		Νο
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		Νο
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		Νο
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο
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		Νο
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	Yes	
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	Yes	
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	Yes	
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		No

orm	990 (2008)			Page
Pai	rt V Statements Regarding Other IRS Filings and Tax Compliance		1	
			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			
	175			
ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
	1b 0			
С	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			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes	
-	,			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		No
Ь	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		No
Ь	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			
5a	Financial Accounts Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	5b		
	Prohibited Tax Shelter Transaction?	5с		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		Νo
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).			
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than	7a		
L	\$75?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	70		
Ī	file Form 8282?	7c		
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		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f _		
_	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	7g		
"	required?	7h		
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and 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.			
а	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			
	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			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)..........			
	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		[

12b

(202) 406-3732

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

Se	ction 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 circumstances, process, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body 1a 34			
ь	Enter the number of voting members that are independent 1b 33			
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		Νο
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		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		N o
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		No
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νο
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9a	Does the organization have local chapters, branches, or affiliates?	9a	Yes	
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	Yes	
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		No
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		No
Se	ction B. Policies			
			Yes	No
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
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			
	The organization's CEO, Executive Director, or top management official?	15a	Yes	
Ь	Other officers or key employees of the organization?	15b	Yes	
	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		No
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		
	ction 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 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. See Additional Data Table			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the CHRISTY LILJA 600 MARYLAND AVE SW SUITE 1000W WASHINGTON, DC 20024	ie orga	nızatıor	n ►

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

Check this box if the organization did not compensate any officer, director, trustee or key employee

- 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, or 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 DOX II TI	ie organizat	tion did not compensate any officer,	une	,	tiu	stee (או וכ	y employee			
		(C) Position (check all that apply)			(5)	(E)	(F) Estimated				
(A) Name and Title	(B) Average hours per week	x <u>I</u> ndividual	Institutional Trustee		Key employee	Former Highest compensated employee		(D) Reportable compensation from the organization (W- 2/1099- MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	amount of other compensation from the organization and related organizations	
BOB STALLMAN PRESIDENT AND DIRECTOR	40 00	Х		х				440,915	0	66,385	
Ronald Anderson DIRECTOR	2 00	Х						5,900	0	0	
Steve Baccus DIRECTOR	2 00	Х						6,100	0	0	
Marshall Coyle DIRECTOR	2 00	Х						6,700	0	0	
Kenneth Dierschke DIRECTOR	2 00	Х						6,300	0	0	
Alex Dowse DIRECTOR	2 00	Х						7,000	0	0	
Zippy Duvall DIRECTOR	2 00	Х						6,900	0	0	
Alan Foutz DIRECTOR	2 00	Х						8,100	0	0	
Terry Gilbert DIRECTOR	2 00	Х						12,900	0	0	
John Hoblick DIRECTOR	2 00	Х						6,300	0	0	
Leland Hogan DIRECTOR	2 00	Х						5,900	0	0	
Charles Kruse DIRECTOR	2 00	Х						7,600	0	0	
Townsend Kyser DIRECTOR	2 00	Х						11,000	0	0	
Craig Lang DIRECTOR	2 00	Х						4,000	0	0	
John W Lincoln DIRECTOR	2 00	Х						7,700	0	0	
Doug Mosebar DIRECTOR	2 00	Х						3,500	0	0	
Philip Nelson DIRECTOR	2 00	Х						12,100	0	0	

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

	1	Г						1		
		(C) Position (check all that apply)					(2)	(=)	(F)	
(A) Name and Title	(B) Average hours per week	x <u>I</u> ndividual	Institutional Trustee	Office	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	Estimated amount of other compensation from the organization
			Trustee	-	9940	pensated	<u> </u>	MISC)	MISC)	and related organizations
Jerry Newby DIRECTOR	2 00	Х						3,500	0	C
Richard Nieuwenhuis DIRECTOR	2 00	х						6,400	0	C
Keith Olsen DIRECTOR	2 00	Х						6,300	0	C
Bob Peterson DIRECTOR	2 00	Х						5,800	0	C
Wayne Pryor DIRECTOR	2 00	Х						4,900	0	C
Stanley Reed DIRECTOR	2 00	Х						4,500	0	C
Kevin Rogers DIRECTOR	2 00	Х						2,700	0	C
Carl Shaffer DIRECTOR	2 00	Х						4,000	0	C
Mike Spradling DIRECTOR	2 00	Х						5,500	0	C
Lacy Upchurch DIRECTOR	2 00	X						5,700	0	C
Scott Vanderwal DIRECTOR	2 00	Х						5,400	0	C
Don Villwock DIRECTOR	2 00	Х						6,700	0	C
David Waide DIRECTOR	2 00	Х						4,500	0	C
Michael White DIRECTOR	2 00	Х						6,500	0	C
David Winkles DIRECTOR	2 00	Х						7,900	0	C
Wayne Wood DIRECTOR	2 00	Х						4,400	0	C
Larry Wooten DIRECTOR	2 00	Х						6,200	0	C
BARRY BUSHUE VICE PRESIDENT & DIRECTO	40 00	х		х				18,450	0	C
Richard Newpher EXEC VICE PRESIDENT &	40 00			Х				307,868	0	68,397
Julie Anna Potts Gen Counsel & Sec	40 00			Х				214,376	0	49,373
C David Mayfield CORP SECRETARY	40 00			Х				182,867	0	42,740
DAVID P CONOVER DIRECTOR, ADMINISTRATIVE	40 00				х			226,253	0	46,324
MARK A MASLYN EXEC DIRECTOR, PUBLIC P	40 00				х			213,004	0	36,223
ROBERT E YOUNG CHIEF ECONOMIST	40 00				х			208,523	0	40,784
DONALD M LIPTON DIRECTOR, PUBLIC RELATIO	40 00				х			169,279	0	34,254
BRADLEY J ECKART DIRECTOR, ORGANIZATION D	40 00				х			164,887	0	52,041
Mary Kay Thatcher Director, Public Policy	40 00					х		162,699	0	26,819
Rosemarie Watkins director, public Policy	40 00					х		149,948	0	26,561
Paul Schegel director, public Policy	40 00					х		144,289	0	21,562
Richard Krause Sr Director, Public Poli	40 00					х		138,986	0	28,699
David Francis Director, IT & communica	40 00					х		132,685	0	32,065
1b Total					Þ	-		3,083,929	0	572,227

Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization▶35

			Yes	NO
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		Νο
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	4	Yes	
_		_	103	
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 I for such person	5		Νo

Section	R	Independent	Contract	ore

 $Complete \ this \ table \ for \ your \ five \ highest \ compensated \ independent \ contractors \ that \ received \ more \ than$

\$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
CROWELL & MORING LLP 1001 PENNSYLVANIA AVENUE NW WASHINGTON, DC 20004	AFBF LLC LEGAL SERVICES	173,685
ROYLANCE ABRAMS BERDO & GOODMAN LLC 1300 19TH STREET NW SUITE 600 WASHINGTON, DC 20036	AFBF LEGAL SERVICES	163,358
VISUALEYES CORPORATION 22842 SOUTH HARLEM AVENUE FRANKFORT, IL 60423	AFBF AUDIO VIDEO SERVICES	155,364
MAYER BROWN LLP 1999 K STREET NW WASHINGTON, DC 20006	AFBF LLC LEGAL SERVICES	131,094

					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
22	1a	Federated camp	paigns 1a					
5	b	Membership du	es 1b					
and other similar amounts	c	Fundraising eve	ents 1c					
r a	d		rations 1d					
<u>,≅</u>				-				
	e	Government grants						
<u></u>	f	All other contribution similar amounts no	ons, gifts, grants, and 1f					
≨	g		butions included in					
-	_	lines 1a-1f\$_						
a l	h		s 1a-1f	▶				
				Business Code				
월	2a	MEMBERSHIP DUES	2		25 110 656	25 110 656		
je K				900,099	25,110,656	25,110,656		
또	Ь							
<u> </u>	С							
er er	d							
න =	e							
Program Service Revenue	f	All other progra	ım service revenue					
္ ြ	-	, , , , , , , , , , , , , , , , , , ,						
<u> </u>	g	Total. Add lines	s 2a-2f	▶	25,110,656			
:	3	Investment inc	ome (including dividen	ds, interest				
		and other simila	aramounts)	🕨	836,663			836,663
	4	Income from inves	tment of tax-exempt bond	proceeds 🕨				
	5	Royalties		▶ │				
			(ı) Real	(II) Personal				
	6a	Gross Rents	206,541	, ,				
	b	Less rental						
	_	expenses	206 544					
	С	Rental income or (loss)	206,541					
	d	Net rental incor	me or (loss)		206,541			206,541
			(ı) Securities	(II) O ther				
;	7a	Gross amount from sales of	7,500,000					
		assets other						
		than inventory Less cost or	7,534,765	4.016				
	Ь	other basis and	7,534,765	4,016				
		sales expenses	-34,765	4.016				
	C	Gain or (loss)		-4,016	20.701			20 704
_	d		s)		-38,781			-38,781
	8a	Gross income fi events (not incl \$ of contributions See Part IV, lin	luding reported on line 1c)					
;	L							
	b		penses b	events 🕨				
⊢	с 9а		loss) from fundraising	evento F				
	эа	See Part IV, lin	rom gaming activities le 19 a					
	b	Less direct exi	penses b					
	c		loss) from gaming activ	vities				
	10a	Gross sales of returns and allo	inventory, less					
			а					
	b		oods sold b					
	с	Net income or (loss) from sales of inve	entory 🟲				
		Miscellaneous	Revenue	Business Code				
[:	11a							
	ь							
	С	A.II						
	d	All other revenu						
	е	Total. Add lines			26 445 070	25,110,656		1.004.422
[]	12	Total Revenue.	Add lines 1h, 2g, 3, 4,	5,6d,7d,8c, ▶	26,115,079	25,110,656	0	1,004,423

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organiz

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).						
			s (B), (C), and (B)	(D).	(D)	
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses		Fundraising expenses	
1	Grants and other assistance to governments and organizations in the U S $$ See Part IV , line 21 $$	447,000				
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	2,791,845				
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	7,302,383				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)					
9	Other employee benefits	3,601,569				
10	Payroll taxes	680,877				
11	Fees for services (non-employees)					
а	Management					
ь	Legal	923,535				
c	Accounting	185,697				
d	Lobbying					
e	Professional fundraising See Part IV, line 17					
f	Investment management fees					
g	Other					
12	Advertising and promotion	417,012				
13	Office expenses	234,520				
14	Information technology					
15	Royalties					
16	Occupancy	2,815,761				
17	Travel	3,072,197				
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	736,253				
23	Insurance	136,456				
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	PRO GRAMS	1,523,226				
b	OUTSIDE SERVICES AND CO	370,558				
c	faRM BUREAU NETWORK	255,191				
d	DUES AND SUBSCRIPTIONS	214,751				
e	TELEPHONE	113,419				
f	All other expenses	-315,411				
25	Total functional expenses. Add lines 1 through 24f	25,506,839				
26	Joint Costs. Check here ► ☐ If following SOP 98-2	1				
	Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation					

Pa	rt X	Balance Sheet						inc.
					(A)		(B	-
	1	Cash—non-interest-bearing			Beginning of year 6,374,500	1	End of	year 7,095,637
	2	Savings and temporary cash investments			6,846,354			6,540,382
	3	Pledges and grants receivable, net	•		0,040,004	3		5,040,002
	4	Accounts receivable, net	•		296,562	4		286,125
	5	Receivables from current and former officers, directors, trustees other related parties Complete Part II of Schedule L		mployees or		5		
	6	Receivables from other disqualified persons (as defined under se persons described in section 4958(c)(3)(B) Complete Part II of S	ction 4			6		
	7	Notes and loans receivable, net	criedui	e L		7		
\$	8	Inventories for sale or use			8			
Assets	9	Prepaid expenses and deferred charges			551,514	- +		446,569
⋖	10a	Land, buildings, and equipment cost basis	10a	8,767,092				,
	b	Less accumulated depreciation Complete Part VI of Schedule D						5,090,457
	11	Investments—publicly traded securities			5,522,457 11,275,032	-		9,967,776
	12				9,070,873			9,997,018
		Investments—other securities See Part IV, line 11		•	9,070,873		•	9,997,016
	13	Investments—program-related See Part IV, line 11				13		
	14	Intangible assets			4 770 004	14		070.040
	15	Other assets See Part IV, line 11		•	1,776,931	15		272,310
	16	Total assets. Add lines 1 through 15 (must equal line 34)	•		41,714,223			9,696,274
	17	Accounts payable and accrued expenses			1,064,026			1,304,962
	18	Grants payable	50 707	18		24 222		
	19	Deferred revenue	56,737	19		61,030		
on.	20	Tax-exempt bond liabilities		20				
Ę	21	Escrow account liability Complete Part IV of Schedule D		21				
Liabilities	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			3,234,261			3,325,778
	26	Total liabilities. Add lines 17 through 25			4,355,024	26	•	4,691,770
ces		Organizations that follow SFAS 117, check here ▶ □ and complethrough 29, and lines 33 and 34.	ete lin	es 27				
Balance	27	Unrestricted net assets			37,359,199	27	3:	5,004,504
<u>В</u>	28	Temporarily restricted net assets				28		
Ξ	29	Permanently restricted net assets				29		
or Fund		Organizations that do not follow SFAS 117, check here ► and lines 30 through 34.	l comp	lete				
	30	Capital stock or trust principal, or current funds				30		
Assets	31	Paid-in or capital surplus, or land, building or equipment fund .				31		
AS	32	Retained earnings, endowment, accumulated income, or other fur	nds			32		
Šet	33	Total net assets or fund balances	37,359,199	33	3:	5,004,504		
2	34	Total liabilities and net assets/fund balances			41,714,223	34	3	9,696,274
Pa	rt XI	Financial Statements and Reporting			•			
							Yes	No
1	Acco	unting method used to prepare the Form 990	Accru	al 🗆 Other				
2a	Were	the organization's financial statements compiled or reviewed by a	ın ınde	pendent account	ant?	2a		Νo
b	Were	the organization's financial statements audited by an independen	t acco	untant?		2b	Yes	
c		es" to 2a or 2b, does the organization have a committee that assu , review, or compilation of its financial statements and selection o				2c	Yes	
3a		result of a federal award, was the organization required to undergoe Audit Act and OMB Circular A - 133?			et forth in the	3a		Νo
b	If "Ye	es," did the organization undergo the required audit or audits? $$.				3b		

Additional Data

Software ID:

Software Version:

EIN: 36-0725160

Name: AMERICAN FARM BUREAU FEDERATION

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
PRO GRA MS	1,523,226			
OUTSIDE SERVICES AND CO	370,558			
faRM BUREAU NETWORK	255,191			
DUES AND SUBSCRIPTIONS	214,751			
TELEPHONE	113,419			

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493319039740

OMB No 1545-0047

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

To be completed by organizations described below. Attach to Form 990 or Form 990-EZ

Open to Public

IIILEIIIA	ii Nevellue Selvice					Inspection
If th	e organization answe	red "Ye	s," to Form 990, Part IV, Line 3, or	Form 990-EZ, Pa	rt VI, line 46 (Political Ca	
			mplete Parts I-A and B Do not complet			
	, , ,		01(c)(3)) organizations complete Part	s I-A and C below	Do not complete Part I-B	
	ction 527 organizations			F 000F7 D		_4::4:\
			s," to Form 990, Part IV, Line 4, or have filed Form 5768 (election under		, , ,	•
			: have NOT filed Form 5768 (election under			
			s," to Form 990, Part IV, Line 5 (Pr	,	1)) Complete Full II-B Both	of complete Falt II-A
	ection 501(c)(4), (5), or (6		•	, ,		
	me of the organization		·		Employer iden	itification number
AM	ERICAN FARM BUREAU FEDER	RATION			36-0725160	
Par	t I-A To be comp	leted b	y all organizations exempt	ınder section		527
			e the instructions for Schedule C			02,
1	Provide a description	of the org	ganızatıon's dırect and ındırect politic	al campaign acti	vities in Part IV	
2	Political expenditures					\$
3	V olunteer hours					
Par	t I-B To be comp for Schedule		y all organizations exempt (under section	501(c)(3). (See the	instructions
1			e tax incurred by the organization und	er section 4955		\$
2		-	e tax incurred by organization manage		4955	\$
3			a section 4955 tax, did it file Form 4			「Yes
4a	Was a correction made			, _ , , , , , , , , , , , , , , , , , ,		┌ Yes ┌ No
ь	If "Yes," describe in P					, 122 , 122
Par	t I-C To be comp	leted b	y all organizations exempt	under section	501(c), except sect	ion 501(c)(3).
	•		for Schedule C for details.)			_
1			ended by the filing organization for se			\$
2	Enter the amount of th 527 exempt funtion ac		rganızatıon's ınternal funds contribut	ed to other organ	ızatıons for section	\$
3	Total of direct and ind 1120-POL, line 17b	ırect exe	mpt function expenditures Add lines	1 and 2 and ente	r here and on Form	\$
4	Did the filing organizat	tion file F	form 1120-POL for this year?			┌ Yes ┌ No
5	were made Enter the a political contributions	amount p	nd Employer Identification Number (E laid and indicate if the amount was pa d and promptly and directly delivered action committee (PAC) If additional	aid from the filing to a separate pol	organization's own interna itical organization, such a	l funds or were s a separate
	(a) Name		(b) Address	(c) EIN	(d) A mount paid from filing organization's internal funds If none, enter - 0 -	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
				i	i	i

d Grassroots non-taxable amount

f Grassroots lobbying expenditures

e Grassroots ceiling amount (150% of line d, column (e))

P	art II-A To be completed by (election under sec						768
	Check If the filing organization	belongs to an affili	ated group				
<u>B</u>	Check If the filing organization Limits on Lo (The term "expenditure	bbying Expend	litures—		oly	(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influe	nce public opinion	(grass roots lob	bying)			
ь	Total lobbying expenditures to influe	nce a legislative b	ody (direct lobby	yıng)			
c	Total lobbying expenditures (add line	es 1a and 1b)					
d	Other exempt purpose expenditures						
e	Total exempt purpose expenditures	(add lines 1c and 1	Ld)				
f	Lobbying nontaxable amount Enters columns— If the amount on line 1e, column (a) or (b) is: Not over \$500,000		taxable amount				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% o	of the excess over \$	500,000			
	Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000						
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of	f the excess over \$1	1,500,000			
	Over \$17,000,000	\$1,000,000					
	Grassroots nontaxable amount (ente	er 25% of line 1f)					
h	Subtract line 1g from line 1a Enter	0- ıflıne g ıs more	than line a				
i	Subtract line 1f from line 1c Enter-	0- ıflıne fıs more t	than line c				
j	If there is an amount other than zero section 4911 tax for this year?	on either line 1h c	or line 11, did the	organization file	Form 4720 rep	orting	┌ Yes ┌ No
	(Some organizations tha columns below.		on 501(h) el	ection do not	: have to cor		he five
	Lobb	ying Expendit	ures During	4-Year Avera	ging Period		
	Calendar year (or fisca beginning in)	l year	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
_2a	Lobbying non-taxable amount						
	Lobbying ceiling amount (150% of line 2a, column(e))						
	: Total lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2008

Sche	dule C (Form 990 or 990-EZ) 2	008					Рa	ige 3
Pa			ler section 501(c)(3) that have instructions for Schedule C for de			ed F	orm	
				(a)		(b)	
			Ye	:s	No	A	moun	t
1		ganization attempt to influence foreign pt to influence public opinion on a legis						
а	V olunteers?							
b	Paid staff or management (inclu	ide compensation in expenses reported	l on lines c through i)?			<u> </u>		
c	Media advertisements?							
d	Mailings to members, legislator	rs, or the public?						
е	Publications, or published or br	oadcast statements?						
f	Grants to other organizations fo	or lobbying purposes?						
g	Direct contact with legislators,	their staffs, government officials, or a l	egislative body?					
h	Rallies, demonstrations, semin	ars, conventions, speeches, lectures, o	rany other means?					
i	Other activities If "Yes," desc	rıbe ın Part IV						
j	Total lines 1c through							
2a	1: Did the activities in line 1 caus	e the organization to be not described i	n section 501(c)(3)?	1	I			
b	If "Yes" enter the amount of an	y tax incurred under section 4912						
		<i>.</i> y tax incurred by organization manager	s under section 4912		ŀ			
		d a section 4912 tax, did it file Form 4		1	l			
			under section 501(c)(4), secti	on'	501(c)(5)	. or	
). (See the instructions for Sched					,	
	Managaria da Araba II. a II. (0.0%)				_	_	Yes	No
1		more) dues received nondeductible by			-		Yes	N.
2	<u> </u>	in-house lobbying expenditures of \$2,0			<u> </u>	2		Νο
3		arryover lobbying and political expendit			<u> </u>	3		Νo
Par	section 501(c)(6		under section 501(c)(4), secti 1 and 2 are answered "No" Olons for Schedule C for details.)					
1	Dues, assessments and similar			Ŀ	1 \$			
2	Section 162(e) non-deductible expenses for which the section	lobbying and political expenditures (do on 527(f) tax was paid).	o not include amounts of political					
а	Current Year			2	2a\$			
b	Carryover from last year			7	2b\$			
c	Total			7	2 c \$			
3	Aggregate amount reported in s	section 6033(e)(1)(A) notices of nonde	ductible section 162(e) dues	- [:	3 \$			
4		nount on line 2c exceeds the amount on carryover to the reasonable estimate o						
	expenditure next year?	carryover to the reasonable estimate o	i nondeductible lobbying and political	4	4 \$			
5	•	d political expenditures (line 2c total m	inus 3 and 4)	·	5 \$			
Pa	art IV Supplemental In		•					
		escriptions required for Part I-A, line 1,	Part I-B, line 4, Part I-C, line 5, and Pa	rt II	-B, line	11		
	Ident if ier	Return Reference	Explanation					

Part IV Supplemental I	nformation	
Ident if ier	Return Reference	Explanation

Schedule C (Form 990 or 990EZ) 2008

Aggregate contributions to (during year)

Aggregate grants from (during year)

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D

(Form 990)

3

Department of the Treasury Internal Revenue Service

► Attach to Form 990. To be completed by organizations that

Supplemental Financial Statements

answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Employer identification number Name of the organization AMERICAN FARM BUREAU FEDERATION 36-0725160 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year

Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised ☐ Yes □ No funds are the organization's property, subject to the organization's exclusive legal control?

Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit?

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV,

- Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Protection of natural habitat Preservation of certified historic structure
 - Preservation of open space
- Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year
- Total number of conservation easements
- b Total acreage restricted by conservation easements
- c Number of conservation easements on a certified historic structure included in (a)
- Number of conservation easements included in (c) acquired after 8/17/06

- Held at the End of the Year 2a 2b 2c 2d
- Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year 🕨
- Number of states where property subject to conservation easement is located
- Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds?

- Staff or volunteer hours devoted to monitoring, inspecting and enforcing easements during the year 🕨
- 7 A mount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ \$
- Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)?

☐ Yes

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items
- If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
 - (i) Revenues included in Form 990, Part VIII, line 1

For Paperwork Reduction Act Notice, see the Intructions for Form 990

(ii) Assets included in Form 990, Part X

- If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items
- Revenues included in Form 990, Part VIII, line 1

▶ \$

Assets included in Form 990, Part X

Schedule D (Form 990) 2008

Cat No 52283D

Pari	••• Organizations Maintaining Co	llections of Art	t, His	tori	cal Ti	reasu	ires, or C	<u> the</u>	<u>r Similar As</u>	sets (continued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	e foll	owing '	that ar	e a sıgnıfıc	ant u	se of its collect	ion	
а	Public exhibition		d	Γ	Loan	orexc	hange prog	rams			
ь	Scholarly research		e	\sqcap	Other	r					
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	ain hov	v the	/ furthe	er the d	organizatioi	n's ex	remnt nurnose i	n	
•	Part XIV	meetions and expit	1111 1101	v ciic,	runcino	or the t	organizaciói	13 CA	tempt purpose i	.,	
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t									Yes	□ No
Par	t IV Trust, Escrow and Custodial								<u> </u>		,
	Part IV, line 9, or reported an an						inizacion c				
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other intermo	ediary	for c	ontribu	itions (or other ass	sets i	not	Yes	Г No
b	If "Yes," explain why in Part XIV and comple	te the following tab	le				-				
									Am	ount	
C	Beginning balance							1c			
d	Additions during the year]	1d			
e	Distributions during the year						Ţ	1e			
f	Ending balance							1 f			
2a	Did the organization include an amount on Fo	orm 990, Part X, lin	e 21?							Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	•									
Pai	tt V Endowment Funds. Complete	f the organizatio	n ans	were	ed "Ye	s" to	Form 990				
		(a)Current Year	(b)	Prior \	'ear	(c) Tw	o Years Back	(d)	Three Years Back	(e) Four `	Years Back
1a	Beginning of year balance							_			
b	Contributions										
c	Investment earnings or losses										
d	Grants or scholarships										
e	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the yea	r end halance held	as								
a	Board designated or quasi-endowment	. ena paramee mera									
ь	Permanent endowment -										
c 3a	Term endowment ► Are there endowment funds not in the posse:	ssion of the organiz	ation t	hat a	re hel	d and a	ıdmınıstara	d for	the		
	organization by	or the organiz						u .o.		Yes	No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	<u> </u>
Ь	If "Yes" to 3a(II), are the related organizatio							•	3t	<u> </u>	
4	Describe in Part XIV the intended uses of th					00 5		4.0			
Par	t VI Investments—Land, Buildings	s, and Equipme	nt. S				· ·		Ī	1	
	Description of investment				Cost or s (inves		(b)Cost or o		(c) Depreciation	(d) B	ook value
1a	_and										
b I	Buildings		•								
c I	_easehold improvements		•				5,40	7,963	1,259,32	8	4,148,635
d I	Equipment						1,01	0,327	788,57	0	221,757
								8,802		7	720,065
Tota	l. Add lines 1a-1e <i>(Column (d) should equal Fo</i>	orm 990, Part X, colui	mn (B)	, line	10(c).)						5,090,457
									Schedule D	(Form	990) 2008

Part VIII Investments—Other Securities. See	: Form 990, Part X, line 12		
(a) Description of security or category (including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value	
Financial derivatives and other financial products		·	
Closely-held equity interests	8,997,018		F
Other	, ,		
FARM BUREAU BANCORP SUBORDINATED DEBT	1 000 000		_
NOTE	1,000,000		F
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. Se	ee Form 990, Part X, line 1		
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
Takel (Column (h) should aqual Form 000, Part V, col (D) line 12.)			
Total. (Column (b) should equal Form 990, Part X, col (B) line 13) Part IX Other Assets. See Form 990, Part X, II			
(a) Descri		(b) Book value	
(,		(-)	
Tabel (Caluman (b) about a good Farms 000 Part V and (B) line	15 \		
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part			
(a) Description of Liability	(b) A mount		
Federal Income Taxes	(b) Amount		
DEFERRED RENT EXPENSE	1,432,886		
DEFERRED LEASE INCENTIVE	1,892,892		
DEFERRED LEASE INCENTIVE	1,892,892		
	+		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	3,325,778		

	Reconciliation of Change in Net Assets from Form 990 to Financial Statemen		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	26,115,079
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	25,506,839
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	608,240
4	Net unrealized gains (losses) on investments	4	804,364
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-3,767,299
9	Total adjustments (net) Add lines 4 - 8	9	-2,962,935
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-2,354,695
Part			
1	Total revenue, gains, and other support per audited financial		26,383,915
	statements	1	
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	268,939
3	Subtract line 2e from line 1	3	26,114,976
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
С	Add lines 4a and 4b	4c	103
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	26,115,079
	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses		
1	Total expenses and losses per audited financial statements	1	25,020,598
2	A mounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities		
a b			
c	Prior year adjustments		
d	Other (Describe in Part XIV)		
u e	Add lines 2a through 2d	2e	4,016
3	Subtract line 2e from line 1	3	25,016,582
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		23,010,362
	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
a b	Other (Describe in Part XIV) 4b 490,257		
c	Add lines 4a and 4b	4c	490,257
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	25,506,839
		_	

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Ident if ier	Return Reference	Explanation
Part XI, Line 8 - Other Adjustments		EQUITY IN NET INCOME (LOSS) OF SUBSIDIARIES - 73857 PENSION RELATED CHARGES OTHER THAN NET PERIODIC PENSION COST -3693442
Part XII, Line 2d - Other Adjustments		EQUITY IN NET INCOME (LOSS) OF SUBSIDIARIES - 535425
Part XII, Line 4b - Other Adjustments		INVESTMENT INCOME FROM AFBF LEGAL ADVOCACY - SINGLE MEMBER LLC 4119 LOSS ON SALE OF PROPERTY AND EQUIPMENT -4016
Part XIII, Line 2d - Other Adjustments		LOSS ON SALE OF PROPERTY AND EQUIPMENT 4016
Part XIII, Line 4b - Other Adjustments		EXPENSES OF AFBF LEGAL ADVOCACY - SINGLE MEMBER LLC 490257

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Grants and Other Assistance to Organizations,

OMB No 1545-0047

DLN: 93493319039740

Department of the Treasury Internal Revenue Service Name of the organization

Schedule I

(Form 990)

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

Governments and Individuals in the U.S.

Open to Public Inspect ion

Employer identification number

EDERATION					36-0725160	
			ance, the grantees' elic	gibility for the grants or a	ssistance, and	
d to award the gra	nts or assistance?					✓ Yes 「
IV, line 21 for a edule I-1 if add	ny recipient that rec itional space is	eived more than \$5,0	000. Check this box	if no one recipient rec	eived more than \$5,	
(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance			(h) Purpose of grant or assistance
				•		8
		<u> </u>				6 nedule I (Form 990) 2008
	aintain records to ad to award the graph of the Assistance IV, line 21 for a edule I-1 if add	mation on Grants and Assistance annual records to substantiate the amount of to award the grants or assistance?	mation on Grants and Assistance annain records to substantiate the amount of the grants or assistance?	mation on Grants and Assistance antain records to substantiate the amount of the grants or assistance, the grantees' elig d to award the grants or assistance?	mation on Grants and Assistance intain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or as do award the grants or assistance? riganization's procedures for monitoring the use of grant funds in the United States. Complete if the CIV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient recedule I-1 if additional space is (b) EIN (c) IRC section if applicable (d) Amount of cash assistance (f) Method of valuation (book, FMV, appraisal, other) (b) EIN (c) IRC section if applicable (d) Amount of cash assistance (d) Amount of cash assistance (book, FMV, appraisal, other) (c) IRC section if applicable (d) Amount of cash assistance (d) Amount of cash a	mation on Grants and Assistance sentain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and d to award the grants or assistance? grantation's procedures for monitoring the use of grant funds in the United States. Complete if the organization answere the Assistance to Governments and Organizations in the United States. Complete if the organization answere than \$5,000. Check this box if no one recipient received more tha

	•	,										
Part III	Grants	s and Other	Assistance to	Individuals in	the United States.	Complete if the	organization a	answered "Y	es" on Form	າ 990,	Part IV, lır	ne 22.
	Use Sc	chedule I-1 (Form 990) if add	ditional space is r	needed.							

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

See Additional Data Table

Ident if ier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S		Schedule I, Part I, Line 2 CONTRIBUTIONS ARE REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS DURING THE BUDGET APPROVAL PROCESS THE CONTRIBUTIONS APPROVED BY THE BOARD MEET THE MISSION OF THE ORGANIZATION SINCE THE FUNDS ARE TO BE USED FOR THE GENERAL SUPPORT OF AGRICULTURAL PROGRAMS, THE RECIPIENTS ARE NOT REQUIRED TO SUBSTANTIATE THEIR EXPENDITURES RELATED TO THESE CONTRIBUTIONS

Software ID: Software Version:

EIN: 36-0725160

Name: AMERICAN FARM BUREAU FEDERATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

i orini 990,3chedule 1, Fai	it II, Grants a	illu Other Assistani	ce to doverninent	s and Organizatio	ons in the officed St	ates	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANIMAL AGRICULTURE ALLIANCEPO BOX 9522 Arlington, VA 22209	54-1384916	501(C)(3)	5,000				GENERAL SUPPORT OF AGRICULTURAL PROGRAMS
BOB GRAY LLC6435 ALDERMAN DRIVE ALEXANDRIA,VA 22315	54-2014614		5,000				GENERAL SUPPORT OF AGRICULTURAL PROGRAMS
COUNCIL FOR AGRICULTURAL SCIENCE & TECHNOLOGY4420 W LINCOLN WAY AMES,IA 50014	23-7186154	501(C)(3)	5,000				GENERAL SUPPORT OF AGRICULTURAL PROGRAMS
NAT'L FARM-CITY COUN- SPONSORSHIP600 MARYLAND AVENUE SW WASHINGTON, DC 20024	36-6107924	501(C)(3)	6,000				GENERAL SUPPORT OF AGRICULTURAL PROGRAMS
POLICY DIRECTIONS INC 818 CONNECTICUT AVE NW WASHINGTON, DC 20006	52-1907369		6,000				GENERAL SUPPORT OF AGRICULTURAL PROGRAMS
LAA818 CONNECTICUT AVE NW WASHINGTON,DC 20006	20-2635587		7,500				GENERAL SUPPORT OF AGRICULTURAL PROGRAMS
MINOR CROP FARMERS ALLIANCE1901 PENNSYLVANIA AVE NW WASHINGTON,DC 20006	54-1608554	501(C)(6)	7,500				GENERAL SUPPORT OF AGRICULTURAL PROGRAMS
CONGRESSIONAL SPORTSMEN'S FOUNDATION110 NORTH CAROLINA AVE SE WASHINGTON, DC 20003	52-1686163	501(C)(3)	10,000				GENERAL SUPPORT OF AGRICULTURAL PROGRAMS
EDISON ELECTIC INSTITUTE701 PENNSYLVANIA AVE NW WASHINGTON,DC 20004	13-0659550	501(C)(6)	10,000				GENERAL SUPPORT OF A GRICULTURAL PRO GRAMS
US CHAMBER OF COMMERCE1615 H STREET NW ROOM 460 WASHINGTON, DC 20062	53-0045720	501(C)(6)	10,000				GENERAL SUPPORT OF AGRICULTURAL PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
HEARTLAND INSTITUTE 19 SOUTH LASALLE STREET CHICAGO,IL 60603	36-3309812	501(C)(3)	18,000				GENERAL SUPPORT OF AGRICULTURAL PROGRAMS		
NATIONAL FFA FOUNDATION6060 FFA DRIVE INDIANAPOLIS, IN 46268	54-6044662	501(C)(3)	42,000				GENERAL SUPPORT OF AGRICULTURAL PROGRAMS		
AMERICAN FARM BUREAU FOUNDATION FOR AGRICULTURAL600 MARYLAND AVENUE SW WASHINGTON, DC 20024	36-6169577	501(C)(3)	115,000	190,437	FMV	DONATED SERVICES	GENERAL SUPPORT OF AGRICULTURAL PROGRAMS		
KVIE-19348PO BOX 6 SACRAMENTO,CA 95812	94-1421463	501(C)(3)	200,000				GENERAL SUPPORT OF AGRICULTURAL PROGRAMS		

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As Filed Data -

DLN: 93493319039740

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

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

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

2008

Open to Public Inspection

Name of the organization
AMERICAN FARM BUREAU FEDERATION

Employer identification number

36-0725160 **Questions Regarding Compensation** Νo Yes 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 Health or social club dues or initiation fees Tax idemnification and gross-up payments Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain **1**b Yes Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2 Yes 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 Receive a severance payment or change of control payment? Νo 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan? Νo 4c Νo 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 501(c)(3) and 501(c)(4) organizations only 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? 5a 5b 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 The organization? 6b 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 accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe ın Part III

Cat No 50053T

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space 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)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

Compensation Comp	. , , ,				· ·	. ,			
BOB STALLMAN (i) 440,915 56,766 9,619 507,300 Richard Newpher (i) 307,868 58,778 9,619 376,265 Julie Anna Potts (i) 214,376 40,159 9,214 263,749 C David Mayfield (i) 182,867 32,971 9,769 225,607 DAVID P CONOVER (i) 226,253 36,357 9,967 272,577 MARK A MASLYN (i) 213,004 26,883 9,340 249,227 ROBERT E YOUNG (i) 208,523 30,879 9,905 249,307 DONALD M LIPTON (i) 169,279 24,971 9,283 203,533 BRADLEY J ECKART (i) 164,887 38,796 13,245 216,928 Mary Kay Thatcher (i) 162,699 189,518	(A) Name								reported in prior Form
Richard Newpher (i) 307,868 58,778 9,619 376,265			(i) Base compensation	incentive					990 or Form 990-EZ
Julie Anna Potts (i) 214,376 40,159 9,214 263,749	BOBSTALLMAN					56,766	9,619	507,300	
C David Mayfield (i) 182,867 32,971 9,769 225,607 DAVID P CONOVER (i) 226,253 36,357 9,967 272,577 MARK A MASLYN (i) 213,004 26,883 9,340 249,227 ROBERT E YOUNG (i) 208,523 30,879 9,905 249,307 DONALD M LIPTON (i) 169,279 24,971 9,283 203,533 BRADLEY J ECKART (i) 164,887 38,796 13,245 216,928 Mary Kay Thatcher (i) 162,699 20,120 6,699 189,518	Richard Newpher	(I) (II)	307,868			58,778	9,619	376,265	
DAVID P CONOVER (i) 226,253 36,357 9,967 272,577	Julie Anna Potts	(I) (II)	214,376			40,159	9,214	263,749	
MARK A MASLYN (i) 213,004 26,883 9,340 249,227	C David Mayfield					32,971	9,769	225,607	
ROBERT E YOUNG (i) 208,523 30,879 9,905 249,307	DAVID P CONOVER	(I) (II)	226,253			36,357	9,967	272,577	
DONALD M LIPTON (i) 169,279 24,971 9,283 203,533	MARK A MASLYN					26,883	9,340	249,227	
(II) 164,887 38,796 13,245 216,928 Mary Kay Thatcher (I) 162,699 189,518	ROBERT E YOUNG	(I) (II)	208,523			30,879	9,905	249,307	
(II) 20,120 6,699 189,518	DONALD M LIPTON	(I) (II)	169,279			24,971	9,283	203,533	
Mary Kay Thatcher (I) 162,699 20,120 6,699 189,518	BRADLEY J ECKART	(I) (II)	164,887			38,796	13,245	216,928	
<i>1</i>	Mary Kay Thatcher	(1) (11)	162,699			20,120	6,699	189,518	
Rosemarie Watkins (i) 149,948 21,161 5,400 176,509	Rosemarie Watkins					21,161	5,400	176,509	
Paul Schegel (I) 144,289 20,401 1,161 165,851	Paul Schegel					20,401	1,161	165,851	
Richard Krause (i) 138,986 19,688 9,011 167,685	Richard Krause					19,688	9,011	167,685	
David Francis (i) 132,685 22,607 9,458 164,750	David Francis	(I) (II)	132,685			22,607	9,458	164,750	
(i)									
(ii)		(ii)	<u> </u>						

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Return Reference	Explanation
	,	THE PRESIDENT'S AND EXECUTIVE VICE PRESIDENT'S SPOUSES TRAVEL TO AFBF MEETINGS IF THERE ARE SCHEDULED BUSINESS ACTIVITIES THE SCHEDULED ACTIVITIES AT THE MEETINGS MAY INCLUDE OFFICIAL MEETING OF SPOUSES OR COMPANIONS TO INFORM EACH OF THEM ON THE VARIOUS ISSUES FACING AFBF, EDUCATIONAL PRESENTATIONS REGARDING THE INDIVIDUAL STATE FARM BUREAU ACTIVITY AND THE AGRICULTURE OF THE HOST STATE, VISITS TO AGRICULTURAL PRODUCTION FACILITIES, PROGRAMS AND TOURS OF STATE AND COUNTY FARM BUREAU OFFICES, VARIOUS AGRICULTURAL ACTIVITIES PROVIDED BY HOSTING STATE FARM BUREAU, VISITS TO AGRICULTURAL PROCESSING AND MARKETING FACILITIES
_		

Software ID: Software Version:

EIN: 36-0725160

Name: AMERICAN FARM BUREAU FEDERATION

Form 990, Schedule J, Pari	II - Officers, Direc	ctors, Trustees, Ko	ey Employees, an	d Highest Compens	sated Employees		
(A) Name	(B) Breakdown o	f W-2 and/or 1099-MI	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
	(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
	(i) 440,915			56,766	9,619	507,300	
	307,868			58,778	9,619	376,265	
	214,376			40,159	9,214	263,749	
	182,867			32,971	9,769	225,607	
	226,253			36,357	9,967	272,577	
	213,004			26,883	9,340	249,227	
	208,523			30,879	9,905	249,307	
	169,279			24,971	9,283	203,533	
	164,887			38,796	13,245	216,928	
	162,699			20,120	6,699	189,518	
	149,948			21,161	5,400	176,509	
	144,289			20,401	1,161	165,851	
Richard Krause (138,986			19,688	9,011	167,685	
David Francis (132,685			22,607	9,458	164,750	

DLN: 93493319039740

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

► 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.

OMB No 1545-0047

Open to Public Inspection

Name of the organization
AMERICAN FARM BUREAU FEDERATION

Employer identification number

36-0725160

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, Iine 6		AFBF members are the State Farm Bureau's and Presidents of those State Farm Bureau's sit on AFBF Board of Directors Thirty-one of the Board Members of AFBF are State Farm Bureau Presidents. The board positions are determined based on the following interpretation of Section 4, Article VIII of the AFBF bylaws. Total membership - Board Positions Under 200,001 - 4 200,001 - 600,000 - 5 600,001 - 1,000,000 - 6 1,000,001 - 1,400,000 - 7 1,400,001 - 1,800,000 - 8 1,800,001 - 2,200,000 - 9 2,200,001 - 2,600,000 - 10 2,600,001 - 3,000,000 - 11 3,000,001 - 3,400,000 - 12 3,400,001 - 3,800,000 - 13 3,800,001 - 4,200,000 - 14 The Board Positions are determined by the 4 Regions. Northeast Midwest West South In addition to the 4 regions and membership determining the number of board positions for each of the regions - the AFBF Women's Committee Chairman and AFBF YF&R's Committee Chairman also have a seat on the AFBF's Board of Directors

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 7a		SEE RESPONSE TO PART VI, SECTION A, QUESTION 6

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 10		GOVERNING BODY REVIEW OF THE FORM 990 - THE BOARD RETAINS THE SERVICES OF AN INDEPENDENT CPA FIRM TO PREPARE AND REVIEW THE ORGANIZATION'S FORM 990 MANAGEMENT REVIEWS THE COMPLETED FORM 990 AND PROVIDES A FULL COPY TO THE EXECUTIVE COMMITTEE OF THE ORGANIZATION THE EXECUTIVE COMMITTEE MEETS WITH MANAGEMENT TO REVIEW THE FORM 990 THE FORM 990 IS FILED AFTER THE EXECUTIVE COMMITTEE REVIEW THE EXECUTIVE COMMITTEE REPORTS TO THE ENTIRE BOARD THAT THE FORM 990 WAS REVIEWED

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		OFFICERS, DIRECTORS AND EMPLOYEES ARE ANNUALLY REQUIRED TO COMPLETE A CONFLICT OF INTEREST DISCLOSURE STATEMENT AS A PRESCURSOR TO THEIR SERVICE TO THE ORGANIZATION POTENTIAL CONFLICTS ARE LOGGED WITH AND MONITORED BY THE SECRETARY OF THE BOARD

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, Inne 15		Process of Determining Compensation - A Salary Administration Program has been developed by American Farm Bureau Federation for the administration of pay decisions to ensure that employees covered by the program are paid according to fair, equitable and uniform principles. This program has been adopted by the organizations board of directors. In mid-October, Human Resources prepares a report, by department, that includes the following Current Salary Current Grade Midpoint of Grade % - Current Salary to Midpoint Columns are added for the addition of Recommended Increases and formulas for a new Salary and new % of Salary to Midpoint The spreadsheet is then sent to the Executive Vice President Midpoint is determined by the current salary structure. The ranges are reviewed each year and may be shifted in accordance with salary survey data provided each year by PriceWaterhouseCoopers. We ask for data on expected salary increases for the next year and expected shifts in salary grades. The Executive Vice President gives Human Resources an allow ance for each department's salary increases. This is generally in the form of a percent of current total salaries for the department. Human Resources includes the number in the spreadsheet, breaks out each department's information, then sends the appropriate report to each Department Manager along with instructions and deadlines for completion. Department Managers complete the spreadsheet with their recommendations for employee salary increases and return it to Human Resources. Human Resources reviews the recommendations and makes notes for the Executive Vice President review. The notes might include drawing his attention to matters of internal equity, or salary history (like if an employee was promoted and had a recent salary increase). The Executive Vice President may follow up with the Department Manager for further explanations and make changes. Once the document is finalized, Human Resources provides an updated copy for Executive Vice President's Salary is reviewed by the

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		GOVERNING DOCUMENTS - FINANCIAL STATEMENTS AND THE CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST

Identification of Disregarded Entities

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

DLN: 93493319039740

Related Organizations and Unrelated Partnerships

OMB No 1545-0047 2008

Open to Public

Inspection

Schedule R (Form 990) 2008

Department of the Treasury

Part I

AMERICAN FARM BUREAU FEDERATION

(Form 990)

SCHEDULE R

Attach to Form 990. To be completed by organizations that answerd "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37.

Cat No 50135Y

► See separate instructions. Internal Revenue Service Name of the organization

Employer identification number

36-0725160

(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) Direct controlling entity
AFBF LEGAL ADVOCACY PROGRAM LLC 600 MARYLAND AVE SW SUITE 1000 WASHINGTON, DC 20024 65-1294705	POLICY LITIGATION	DE	4,119	2,481,523	
Part II Identification of Related Tax-Exempt Organiza	ations				
,	(, , , , , , , , , , , , , , , , , , ,
(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (stat or foreign country)	te Exempt Code sect	(E) Public charity statu (if section 501(c)(3	(F) Direct controlling entity
AMERICAN FARM BUREAU FOUNDATION FOR AGRICULTURE 600 MARYLAND AVE SW STE 1000	(B) Primary activity ACCUMULATES & DISTRIB FUN FOR MATERIALS,PROGRAM DEV grants and education	or foreign country)	te) Exempt Code sectors (C) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S	Public charity statu (if section 501(c)(3	(F) Direct controlling entity
AMERICAN FARM BUREAU FOUNDATION FOR AGRICULTURE 600 MARYLAND AVE SW STE 1000 washington, DC20024	ACCUMULATES & DISTRIB FUN	or foreign country))	(if section 501(c)(3	(F) Direct controlling entity
AMERICAN FARM BUREAU FOUNDATION FOR AGRICULTURE 600 MARYLAND AVE SW STE 1000 washington, DC20024	ACCUMULATES & DISTRIB FUN	or foreign country))	(if section 501(c)(3	(F) Direct controlling entity
AMERICAN FARM BUREAU FOUNDATION FOR AGRICULTURE 600 MARYLAND AVE SW STE 1000 washington, DC20024	ACCUMULATES & DISTRIB FUN	or foreign country))	(if section 501(c)(3	(F) Direct controlling entity
AMERICAN FARM BUREAU FOUNDATION FOR AGRICULTURE 600 MARYLAND AVE SW STE 1000 washington, DC20024	ACCUMULATES & DISTRIB FUN	or foreign country))	(if section 501(c)(3	(F) Direct controlling entity
AMERICAN FARM BUREAU FOUNDATION FOR AGRICULTURE 600 MARYLAND AVE SW STE 1000 washington, DC20024	ACCUMULATES & DISTRIB FUN	or foreign country))	(if section 501(c)(3	(F) Direct controlling entity

(A) Name, address, and EIN of related organization	(B) Primary activity		(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Predominant income(related, investment, unrelated)	(F) Share of total income	(G) Share of end-of- year assets	(H) Disproprtionat allocations?		te (I) Code V—UBI amount on Box 20 of K-1		(J) General or managing partner?	
								Yes	No			Yes	No
	•								•	•		•	
Part IV Identification of R	elated Org	anizations	Taxable a	s a Corporation	or Trust								
(A) Name, address, and EIN of related org	anızatıon	(B) Primary activi	ty L	(C) egal domicile (state or foreign country)	(D) Direct controlling entity	(E) Type of entity (C corp, S corp, or trust)	(F) Share of total income	2	Sha end-c	G) re of of-year sets	(H Percer owne	ntage	
AMERICAN FARM BUREAU INC (AFBI) 600 MARYLAND AVE SW SUITE 1000W WASHINGTON, DC20024 36-3250406 BUSIN		BUSINESS MANAGEMENT		DC		С	259,35	55 1,679,026		1,679,026	100 000 %		
AMERICAN AGRICULTURAL MARKETING ASSOCIATION 600 MARYLAND AVE SW SUITE 1000W		AG MARKETING SERVICES		DC		С	3	2		8,851	53 500) %	
								_					

No

No

No No No

No No No No

No No No

No No

Pa	art V Transactions with Related Organizations			
	Note. Complete line 1 if any entity is listed in Parts II, III or IV		Y	Υe
L D	During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		
b	Gift, grant, or capital contribution to other organization(s)	1b	Y	/e
c	Gıft, grant, or capital contribution from other organization(s)	1 c		
d	Loans or loan guarantees to or for other organization(s)	1d		
e	Loans or loan guarantees by other organization(s)	1e		
f	Sale of assets to other organization(s)	1 f		
g	Purchase of assets from other organization(s)	1 g		
h	Exchange of assets	1h		
i	Lease of facilities, equipment, or other assets to other organization(s)	1 i		
j	Lease of facilities, equipment, or other assets from other organization(s)	1 j		
k	Performance of services or membership or fundraising solicitations for other organization(s)	1k		
ı	Performance of services or membership or fundraising solicitations by other organization(s)	11		
m	n Sharing of facilities, equipment, mailing lists, or other assets	1m	1	/e
n	Sharing of paid employees	1 n	Y	/ e
0	Reimbursement paid to other organization for expenses	10	Y	/e
p	Reimbursement paid by other organization for expenses	1р	Y	/e
q	O ther transfer of cash or property to other organization(s)	1 q		
r	O ther transfer of cash or property from other organization(s)	1r		

	(A) Name of other organization(s)	(B) Transaction type(a-r)	(C) Amount Involved
(1)	AMERICAN FARM BUREAU FOUNDATION FOR AGRICULTURE	В	305,437
(2)	american farm bureau inc	Р	165,309
(3)	american agricultural marketing association	0	1,000
(4)	american fARM BUREAU FOUNDATION FOR AGRICULTURE	0	121,310
(5)			
(6)			

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

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

	T	ı	(5)		· -			1	1	
(A) Name, address, and EIN of entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Are all partners section 501(c)(3) organizations?		(E) Share of end-of-year assets	(F) Disproprtionate allocations?		(G) Code V—UBI amount on Box 20 of K-1	(H) General o managing partner?	
			Yes	No		Yes	No		Yes	No
	1	1				ı		1		