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Department of the Treasury

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

▶The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection calendar year, or tax year beginning 01-01-2009 and ending 12-31-2009 A For the 2009 D Employer identification number B Check if applicable VIRGINIA FARM BUREAU FEDERATION use IRS Address change 54-0419002 label or Doing Business As E Telephone number print or Name change type. See Specific (804) 290-1000 Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite Instruc-**G** Gross receipts \$ 19,209,719 P O BOX 27552 Terminated tions. City or town, state or country, and ZIP + 4 RICHMOND, VA 232617552 Amended return Application pending Name and address of principal officer Is this a group return for WAYNE F PRYOR affiliates? P O BOX 27552 RICHMOND. VA 232617552 Γ Yes Γ No H(b) Are all affiliates included? If "No," attach a list (see instructions) **✓** 501(c) (5) **◄** (insert no) ☐ 4947(a)(1) or ☐ 527 Group exemption number 🕨 Website: ► VAFBCOM M State of legal domicile VA L Year of formation 1926 Part I Summary Briefly describe the organization's mission or most significant activities Enhancing the agricultural interests of members through economic, political & social programs Activities & Governance Check this box 🔰 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . Number of independent voting members of the governing body (Part VI, line 1b) $\,$. $\,$. Total number of employees (Part V. line 2a) . . . 128 Total number of volunteers (estimate if necessary) . 800 Total gross unrelated business revenue from Part VIII, column (C), line 12 534,841 Net unrelated business taxable income from Form 990-T, line 34 $\,$. -51,374 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) 0 Program service revenue (Part VIII, line 2g) . 2,956,572 2,977,484 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 3,893,686 3,174,818 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 3,187,253 3,180,663 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 10,037,511 9,332,965 53,636 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . 47.039 14 Benefits paid to or for members (Part IX, column (A), line 4) . . 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5 15 6.418.538 5.505.045 **Expenses** 16a Professional fundraising fees (Part IX, column (A), line 11e) . . . 0 Ь Total fundraising expenses (Part IX, column (D), line 25) $\blacktriangleright 0$ **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . . . 3,293,793 3,453,909 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 9,759,370 9,012,590 278,141 19 Revenue less expenses Subtract line 18 from line 12 . 320.375 t Assets or | nd Balances | **Beginning of Current End of Year** Year 20 Total assets (Part X, line 16) . 36,472,876 37,713,065 Total liabilities (Part X, line 26) . . 18,997,105 18,339,752 22 17,475,771 19,373,313 Net assets or fund balances Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign ***** 2010-06-01 Here Signature of officer WAYNE F PRYOR PRESIDENT Type or print name and title Preparer's identifying number Preparer's signature Date Check if Paid empolyed 🕨 🔽 Preparer's Firm's name (or yours EIN ▶ if self-employed), **Use Only** address, and ZIP + 4

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

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

We will enhance, primarily through advocacy, education and communication, the agricultural interests of Farm Bureau members through economic, political and social programs

	. otal program se	Tive expenseer 4			Form 990 (2009)
	Total program se	rvice expenses►\$			
	(Expenses \$	ıncludıng	grants of \$) (Revenue \$)
4d	Other program se	rvices (Describe in Schedule	O) See also Additional Data for	Description	
	A specially trained sta Web sites and public		ests in the state and federal legislative p	rocess through media relations and pro	omotional techniques such as
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
			through the county newsletter program, es media relations training and support t		rochures, and the design and
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	The purpose of the Formaterials The purpose Virginia, is produced :	arm Bureau News is to keep produce se of Cultivate is to promote the imp	s published six times a year A magazine er members (farmers) abreast and awar ortance of agriculture to our associate (i access, government access, network aff	e of agricultural issues and provide the non-farmer) members. A monthly tele	em with educational vision program, Down Home
4a	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4	Section 501(c)(3)	and 501(c)(4) organizations	each of the organization's three l and section 4947(a)(1) trusts ar venue, if any, for each program s	e required to report the amount	
	If "Yes," describe t	these changes on Schedule O			
3	•	on cease conducting, or make	significant changes in how it con		Yes 🔽 No
	If "Yes," describe t	these new services on Schedu	ile O		
2	Did the organization the prior Form 990		rogram services during the year v		Yes 🔽 No

Part IV	Che	cklist	of Re	auire	d Sche	dules
	CIIC	LNIISL	UI RE	uune	u Schle	uuies

			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		No
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		No
6	Did the organization maintain any donor advised funds or any similar funds or 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? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	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, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10		No
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	◆ Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	◆ Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		No
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? 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 U S? If "Yes," complete Schedule F, Part II	15		No
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 U S ? If "Yes," complete Schedule F, Part III	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No

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Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States 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 of grants and other assistance to individuals in the United States 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, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? 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 line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? 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, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
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		No
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		No
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		No
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		Νο
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

orm 990 ((2009)		Page 5
Part V	Statements Regarding Other IRS Filings and Tax Compliance		
_		Yes	No

			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			
L	Enter the number of Forms W. 2G uncluded in line 15. Enter C. if not applicable	1		
D	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
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			
ь	return	2b	Yes	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	20	165	
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
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		Νo
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			
ā	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
а	Does the organization have annual gross receipts that are normally greater than \$100,000, and 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		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
3	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
)	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		
.0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a	1		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
.1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders	1		
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 year			

12580 WEST CREEK PARKWAY RICHMOND, VA 23238 (804) 290-1000

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body 1a 18			
ь	Enter the number of voting members that are independent 1b 17	1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any	1		
-	other officer, director, trustee, or key employee?	2		Νo
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		Νο
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Νo
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νο
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	Yes	
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		Νo
9	Is there any officer, director, 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	9		Νο
	ection B. Policies (This Section B requests information about policies not required by the Internal			
Re	evenue Code.)			
			Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a	Yes	
	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?	10b	Yes	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
c	to conflicts?	12b	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		Νο
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?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line a or b, 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		Νο
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		
Se	ection 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	ne orga	ınızatıor	n 🕨
	DAVID PRIDDY			

Part VIII 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 Report compensation for the calendar year ending with or within the organization's tax year. 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 all of the organization's current key employees. See instructions for definition of "key employee"
- 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 box if the organization did i	ffice	r, dırector, trustee	or key employee							
(A) Name and Title	(B) Average hours	(C) Position (check all that apply)				I		(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data										

For	n 990 (2009)			Page 8
1 b	Total	0		208,184
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ▶6			
			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> " <i>Yes,"</i> complete Schedule <i>J</i> for such individual	3		No
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	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No
S	ection B. Independent Contractors			
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization			
	(A) Name and business address (B) Description of services		Compe	
2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization \(\mathbb{E}\)0			
		F	orm 99	0 (2009)

Form 990 (2009) Part VIII Statement of Revenue									
Part	/!!!!	Statement o	or Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514	
nts	1a	Federated camp	paigns 1a						
grai	Ь	Membership du							
ts, ⊞	C	•	ents 1c						
<u>_</u>	d	Related organiz Government grants	ations 1d						
ons sin	e f		ons, gifts, grants, and 1f						
美	'	sımılar amounts no	t included above						
Contributions, gifts, grants and other similar amounts	g	lines 1a-1f \$	butions included in						
S E	h		: 1a-1f	▶					
				Business Code					
Program Serwce Revenue	2a	MEMBERSHIP DUES	5	110,000	2,977,484	2,977,484			
둏	Ь								
МСе	C								
Š	d								
E E	e f	All other progra	ım service revenue						
j L	'								
	g		2a-2f		2,977,484				
	3 Investment income (including dividends and other similar amounts)			. F	4,586,781			4,586,781	
			tment of tax-exempt bond	· · ·					
	5	Royalties			2,539,842			2,539,842	
			(ı) Real	(II) Personal					
	6a b	Gross Rents Less rental	1,221,464 782,481						
	-	expenses Rental income	438,983						
	C	or (loss)			438,983		438,983		
	d	Net rental incor	me or (loss) (ı) Securities	(II) O ther	430,303		+30,303		
	7a	Gross amount from sales of assets other than inventory	7,681,590	(1) 2 31131					
	ь	Less cost or other basis and	9,090,815	2,738					
	c	sales expenses Gain or (loss)	-1,409,225	-2,738					
	d		s)		-1,411,963	-1,411,963			
	8a	Gross income fi	rom fundraısıng						
Other Revenue		sof contributions	reported on line 1c)						
her	b	Less direct exi	penses b						
ŏ	С	Net income or (loss) from fundraising	events 🕦					
	9a	Gross income fi See Part IV, lin	rom gaming activities e 19 a						
	b c	Net income or (penses b loss) from gamıng actı	vities					
	10a	Gross sales of returns and allo		6,260					
	b		oods sold b	720					
	С	Net income or (loss) from sales of inve	entory ► Business Code	5,540			5,540	
	11a	MISCELLANEO		110,000	100,440			100,440	
	ь	ADVERTISING		541,800	95,858		95,858		
	С				+				
	d	All other revenu	ne						
	е	Total. Add lines	: 11a-11d		196,298				
	12	Total revenue.	See Instructions		9,332,965	1,565,521	534,841	7,232,603	

Part IX Statement of Functional Expenses

Decided amounts reported on lines 6b, 70, 8b, 9b, and 100 of Part VIII.	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).							
Tool content						(D)		
### Comment See Part IV, Ime 21 Span S		•		Program service	Management and	Fundra ising		
U. S. See Part IV, Inte 22 3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, Inte 3.18 and 1.8 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees. 6 Compensation included above, to disqualified persons (as defined under action 4958(I)(13)) and persons (as defined propose) 8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions). 9 Other employer benefits. 10 Payroll taxes. 11 Pess for services (non-employees) 12 Management. 13 Legal . 19,182 14 Lobbying . 15 Professional fundraising See Part IV, Inte 17 . 15 Investment management fees. 10 Office expenses . 11 Information technology . 12 Adventuring and promotion . 13 Office expenses . 14 Information technology . 15 Royalties . 16 Occupancy . 17 Travel . 18 Payments of travel or entertainment expenses for any federal, state, or local public officials . 19 Conferences, convolutions, and menting . 10 Onter expenses . 11 Information technology . 12 All physics of call the public officials . 19 Conferences, convolutions, and mortization . 19 Payments of travel or entertainment expenses for any federal, state, or local public officials . 10 Compenses . 11 Payments of travel or entertainment expenses for any federal, state, or local public officials . 10 Compenses . 11 Payments of travel or entertainment expenses for any federal, state, or local public officials . 12 All other expenses not covered above (Expenses grouped together and labeled mix cellamenous may not exceed 5% of total expenses provide together and labeled mix cellamenous may not exceed 5% of total expenses and on the 25 below . 15 That I and the control of the contro	1		53,636					
organizations, and individuals outside the U.S. See Part IV, Intex 518 and 15 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not current officers, directors, trustees, and described in section 4958 (C(J)) and persons described in section 4958 (C(J)) and section	2							
S Compensation of current officers, directors, trustees, and key employees	3	organizations, and individuals outside the U.S. See						
Rey employees 579,331 6	4	Benefits paid to or for members						
(as defined under section 4958 (f)(1) and persons described in section 4958 (f)(1) (8) in described in section 4958 (f)(1) in described in section 4958 (f) i	5		579,331					
8 Pension plan contributions (include section 401(k) and section 403(k) employer contributions). 9 Other employee benefits	6	(as defined under section 4958(f)(1)) and persons						
40 3(b) employer contributions) .	7	Other salaries and wages	4,411,846					
10	8		-202,424					
11 Fees for services (non-employees) a Management b Legal c Accounting lobbying 17,913 d Lobbying e Professional fundraising See Part IV, Ine 17 f Investment management fees 10 10,481 g Other 12 Advertising and promotion 596,765 33,731 13 Office expenses 6 Occupancy 15 Royalities 6 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 20 Interest 23 19 Conferences, conventions, and meetings 167,101 20 Interest 23 21 Payments to affiliates 600,960 22 Depreciation, depletion, and amortization 199,764 23 Insurance 19,126 24	9	Other employee benefits	466,952					
11 Fees for services (non-employees) a Management b Legal c Accounting lobbying 17,913 d Lobbying e Professional fundraising See Part IV, Ine 17 f Investment management fees 10 10,481 g Other 12 Advertising and promotion 596,765 33,731 13 Office expenses 6 Occupancy 15 Royalities 6 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 20 Interest 23 19 Conferences, conventions, and meetings 167,101 20 Interest 23 21 Payments to affiliates 600,960 22 Depreciation, depletion, and amortization 199,764 23 Insurance 19,126 24	10	Payroll taxes	249,340					
b Legal	11	Fees for services (non-employees)						
to Accounting	а	Management						
to Accounting	b	Legal	19,182					
d Lobbying	c		17,913					
e Professional fundraising See Part IV, line 17 . f Investment management fees	d	Lobbying						
g Other	e							
12 Advertising and promotion	f	Investment management fees	10,481					
13 Office expenses 53,731	g	Other						
14 Information technology	12	Advertising and promotion	596,765					
15 Royalties	13	Office expenses	53,731					
16 Occupancy 412,580 17 Travel 373,450 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 976 19 Conferences, conventions, and meetings 167,101 20 Interest 23 21 Payments to affiliates 600,960 22 Depreciation, depletion, and amortization 199,764 23 Insurance 19,126 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) 5 a STATE & FEDERAL INCOME -8,606 b PRINTING & PUBLICATIONS 273,593 c QUIPMENT RENT & MAINTE 234,167 YOUNG FARMER ACTIVITIES 103,235 WOMEN'S ACTIVITIES 91,937 f All other expenses 287,531 25 Total functional expenses. Add lines 1 through 24f 9,012,590 26 Joint costs. Check here ▶ I if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational	14	Information technology						
17 Travel 373,450 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 976 19 Conferences, conventions, and meetings 167,101 20 Interest 23 21 Payments to affiliates 600,960 22 Depreciation, depletion, and amortization 199,764 23 Insurance 199,764 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) 573,593 25 FRINTING & PUBLICATIONS 273,593 26 EQUIPMENT RENT & MAINTE 234,167 YOUNG FARMER ACTIVITIES 103,235 YOUNG FARMER ACTIVITIES 103,235 4 Il other expenses 287,531 25 Total functional expenses. Add lines 1 through 24f 9,012,590 26 Joint costs. Check here ▶ If offollowing SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational	15	Royalties						
17 Travel 373,450 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 976 19 Conferences, conventions, and meetings 167,101 20 Interest 23 21 Payments to affiliates 600,960 22 Depreciation, depletion, and amortization 199,764 23 Insurance 199,764 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) 573,593 25 FRINTING & PUBLICATIONS 273,593 26 EQUIPMENT RENT & MAINTE 234,167 YOUNG FARMER ACTIVITIES 103,235 YOUNG FARMER ACTIVITIES 103,235 4 Il other expenses 287,531 25 Total functional expenses. Add lines 1 through 24f 9,012,590 26 Joint costs. Check here ▶ If offollowing SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational	16	Occupancy	412,580					
State, or local public officials 976	17		373,450					
20 Interest	18		976					
Payments to affiliates	19	Conferences, conventions, and meetings	167,101					
Depreciation, depletion, and amortization	20	Interest	23					
Depreciation, depletion, and amortization	21	Payments to affiliates	600,960					
Insurance	22							
grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below) a STATE & FEDERAL INCOME -8,606 b PRINTING & PUBLICATIONS 273,593 c EQUIPMENT RENT & MAINTE 234,167 d YOUNG FARMER ACTIVITIES 103,235 e WO MEN'S ACTIVITIES 91,937 f All other expenses 287,531 25 Total functional expenses. Add lines 1 through 24f 9,012,590 26 Joint costs. Check here Infollowing SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational	23		19,126					
b PRINTING & PUBLICATIONS c EQUIPMENT RENT & MAINTE d YOUNG FARMER ACTIVITIES e WOMEN'S ACTIVITIES f All other expenses 7 Total functional expenses. Add lines 1 through 24f Joint costs. Check here if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational	24	grouped together and labeled miscellaneous may not exceed 5% of						
c EQUIPMENT RENT & MAINTE d YOUNG FARMER ACTIVITIES e WO MEN'S ACTIVITIES f All other expenses 287,531 25 Total functional expenses. Add lines 1 through 24f Joint costs. Check here if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational	а	,	-8,606					
d YOUNG FARMER ACTIVITIES e WOMEN'S ACTIVITIES f All other expenses 287,531 25 Total functional expenses. Add lines 1 through 24f 9,012,590 26 Joint costs. Check here ► ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational	b	PRINTING & PUBLICATIONS	273,593					
e WO MEN'S ACTIVITIES f All other expenses 287,531 25 Total functional expenses. Add lines 1 through 24f 9,012,590 26 Joint costs. Check here ► ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational	С	EQUIPMENT RENT & MAINTE	234,167					
f All other expenses 287,531 25 Total functional expenses. Add lines 1 through 24f 9,012,590 26 Joint costs. Check here ► ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational	d	YOUNG FARMER ACTIVITIES	103,235					
Total functional expenses. Add lines 1 through 24f 9,012,590 Joint costs. Check here ► ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational	e	WO MEN'S ACTIVITIES	91,937					
Joint costs. Check here ► ☐ If following SO P 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational	f	All other expenses	287,531					
Joint costs. Check here ► ☐ If following SO P 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational	25		<u> </u>					
campaign and fundraising solicitation	26	Complete this line only if the organization reported in						

Pa	rt X	Balance Sheet						
					(A) Beginning of year		(B) End of year	
	1	Cash—non-interest-bearing			673,232	1	1,386,842	
	2	Savings and temporary cash investments			2,678,370	2	1,811,345	
	3	Pledges and grants receivable, net				3		
	4	Accounts receivable, net			814,961	4	871,579	
	5	Receivables from current and former officers, directors, trustees highest compensated employees. Complete Part II of	ployees Complete Part II of					
		Schedule L				5		
	6	Receivables from other disqualified persons (as defined under sepersons described in section 4958(c)(3)(B) Complete Part II of		4958(f)(1)) and				
		Schedule L				6		
Assets	7	Notes and loans receivable, net				7		
8	8	Inventories for sale or use			974	8	134	
⋖	9	Prepaid expenses and deferred charges			82,109	9	104,543	
	10a	Land, buildings, and equipment cost or other basis <i>Complete</i> Part VI of Schedule D	10a	1,590,596				
	ь	Less accumulated depreciation	10b	747,252	1,008,715	10c	843,344	
	11	Investments—publicly traded securities			12,098,779	11	12,491,416	
	12	Investments—other securities See Part IV, line 11	2,647,911	12	2,544,849			
	13	Investments—program-related See Part IV, line 11		13				
	14	Intangible assets		14				
	15	Other assets See Part IV, line 11		16,467,825	15	17,659,013		
	16	Total assets. Add lines 1 through 15 (must equal line 34)			36,472,876	16	37,713,065	
	17	Accounts payable and accrued expenses .		2,940,079	17	3,603,660		
	18	Grants payable			18			
	19	Deferred revenue	Deferred revenue					
	20	Tax-exempt bond liabilities				20		
jes	21	Escrow or custodial account liability Complete Part IV of Schedul	eD.	•		21		
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified						
Γįξ		persons Complete Part II of Schedule L				22		
	23	Secured mortgages and notes payable to unrelated third parties	•	•	13,213,257	23	12,287,947	
	24	Unsecured notes and loans payable to unrelated third parties				24		
	25	Other liabilities Complete Part X of Schedule D			1,077,625	25	890,849	
	26	Total liabilities. Add lines 17 through 25			18,997,105	26	18,339,752	
Fund Balances		Organizations that follow SFAS 117, check here ► and comp through 29, and lines 33 and 34.	lete li	nes 27				
an	27	Unrestricted net assets				27		
89	28	Temporarily restricted net assets			28			
Ξ	29	Permanently restricted net assets				29		
표		Organizations that do not follow SFAS 117, check here 🕨 🔽 an	d com	plete				
٥٢		lines 30 through 34.						
	30	Capital stock or trust principal, or current funds			9,209,920		10,236,068	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund			8,259,995		9,131,379	
	32	Retained earnings, endowment, accumulated income, or other fu	nds		5,856		5,866	
Net	33	Total net assets or fund balances			17,475,771		19,373,313	
	34	Total liabilities and net assets/fund balances			36,472,876	34	37,713,065	

Part XI Financial Statements and Reporting

			Yes	No
L	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	☐ Separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Form **990** (2009)

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DLN: 93493152000500

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

Open to Public

anan w	F Attacil to Ft	office separate instructions.			Inspect	
	e of the organization NIA FARM BUREAU FEDERATION		Emplo	yer identifica	tion numbe	r
v IK OI	ATA LAIN'I DOKENO I EDEKATION		54-04	119002		
Part			_		. Complet	e if the
	organization answered "Yes" to Form 99	0, Part IV, line 6. (a) Donor advised funds	(h) Funds and o	ther accour	nte
т	otal number at end of year	(a) Bonor advised failes	()	7 i ulius uliu o	ther accoun	11.3
	ggregate contributions to (during year)					
	aggregate grants from (during year)					
	ggregate value at end of year					
I	Old the organization inform all donors and donor advi unds are the organization's property, subject to the	-	or advis	ed	┌ Yes	┌ No
ı	Old the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit		•	purpose	☐ Yes	┌ No
art	Conservation Easements. Complete	ıf the organızatıon answered "Yes" to	o Form	990, Part IV	, line 7.	
]]]	Purpose(s) of conservation easements held by the or Preservation of land for public use (e g , recreating Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualicatement on the last day of the tax year	on or pleasure) Preservation of an Preservation of a c	ertified	historic struct	·	1
,	sasement on the last day of the tax year	1		Held at the	End of the	Year
a -	Total number of conservation easements		2a			
, -	Total acreage restricted by conservation easements		2b			
ı	Number of conservation easements on a certified his	toric structure included in (a)	2c			
	Number of conservation easements included in (c) ac	equired after 8/17/06	2d			
t I	Number of conservation easements modified, transfe the taxable year F Number of states where property subject to conserva	ation easement is located ►			Jurning	
	Does the organization have a written policy regarding enforcement of the conservation easements it holds?		dling of v	iolations, and	☐ Yes	┌ No
	Staff and volunteer hours devoted to monitoring, insp					
	Amount of expenses incurred in monitoring, inspecting.		_	the year 🟲 \$ _		
:	Does each conservation easement reported on line 2 L70(h)(4)(B)(i) and 170(h)(4)(B)(ii)?				┌ Yes	┌ No
I	in Part XIV, describe how the organization reports co palance sheet, and include, if applicable, the text of t the organization's accounting for conservation easem	he footnote to the organization's financial				
art	Organizations Maintaining Collectio Complete if the organization answered "		or Oth	er Similar <i>I</i>	Assets.	
	f the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fin	for public exhibition, education or research	ch in furt			,
_ I	f the organization elected, as permitted under SFAS historical treasures, or other similar assets held for porovide the following amounts relating to these items	oublic exhibition, education, or research ii				
(i) Revenues included in Form 990, Part VIII, line 1			► \$		
((ii) Assets included in Form 990, Part X					
]	If the organization received or held works of art, historial of the following amounts required to be reported under SFA:		or financi			
a	Revenues included in Form 990, Part VIII, line 1			► \$		

b Assets included in Form 990, Part X

Part	Organizations Maintaining Co	llections of Art	t, His	tori	<u>cal Tr</u>	easu	res, or (<u> Othe</u>	<u>r Simila</u>	<u>r Asse</u>	: ts (cc	ontinued)
3	Using the organization's accession and other items (check all that apply)	r records, check an	y of th	ne foll	lowing t	:hat are	e a signific	ant us	se of its co	ollection	1	
а	Public exhibition		d	Γ	Loan	orexch	nange prog	rams				
b	Scholarly research		e	Γ	Other							
с	Preservation for future generations											
4	Provide a description of the organization's co Part XIV	ollections and expla	ain hov	w the	y furthe	rthe o	rganızatıoı	n's ex	empt purp	ose in		
5	During the year, did the organization solicit cassets to be sold to raise funds rather than t								ılar	Г	Yes	Г No
Par	Part IV, line 9, or reported an an						answere	d "Ye	es" to Fo	rm 990	١,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interm	ediary	for c	ontrıbu	tions o	or other as:	sets r	not	Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ing t	able		ſ	Ι		A mou		
c	Beginning balance						•	1c				
d	Additions during the year						}	1d				
e	Distributions during the year							1e				
f	Ending balance						ŀ	1f				
2a	Did the organization include an amount on Fo	orm 990. Part X. lin	e 21?				L			Г	Yes	┌ No
	If "Yes," explain the arrangement in Part XIV									,		,
Par			n ans	were	ed "Ye	s" to F	orm 990	. Par	t IV. line	10.		
	zila di mila i di mpiaca i	(a)Current Year		Prior `			o Years Back		Three Years		Four Y	ears 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 balance held	as									
а	Board designated or quasi-endowment	%										
ь	Permanent endowment ► %											
c	Term endowment ► %											
3a	Are there endowment funds not in the posses	ssion of the organiz	ation	thata	are held	l and a	dmınıstere	d for	the			
	organization by										Yes	No
	(i) unrelated organizations			•				•		3a(i)		<u> </u>
	(ii) related organizations									3a(ii)	 	<u> </u>
ь 4	If "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of the	•						•		3b	<u> </u>	<u> </u>
- Par						00 Da	rt V line	10				
ΓŒΙ	t vi investments—Land, bundings	s, and Equipme) Cost or		(b)Cost or		(c) Accum	oulated		
	Description of investment				is (inves		basis (oth		depreci		(d) Bo	ook value
1a l	and		•								<u> </u>	
b E	Buildings		•								<u> </u>	
c l	easehold improvements		•								<u> </u>	
d E	quipment										<u> </u>	
									1			
	Other		•			276,653		L3,943		747,252		843,344

Part VIII Investments—Other Securities. See	Form 990, Part X, line 12		
(a) Description of security or category	(b)Book value		d of valuation
(including name of security)		Cost or end-or	-year market value
Financial derivatives			
Closely-held equity interests	663,000		C
Other MORTGAGE LOANS	1,881,849		С
MORIGAGE EDANS	1,001,049		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	2,544,849		
Part VIII Investments—Program Related. See			
			d of valuation
(a) Description of investment type	(b) Book value		-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Total. (Column (b) should equal Form 990, Part X, col (B) line 13) Part IX Other Assets. See Form 990, Part X, lin (a) Descrip	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, III (a) Descrip	ne 15.		
Part IX Other Assets. See Form 990, Part X, III (a) Descrip DEFERRED LOAN COSTS	ne 15.		71,682
Part IX Other Assets. See Form 990, Part X, Image (a) Descriped to the Deferred LOAN COSTS NET INVESTMENT IN DIRECT FINANCING LEASE	ne 15.		71,682 14,181,597
Part IX Other Assets. See Form 990, Part X, Image (a) Descriped to the Deferred LOAN COSTS NET INVESTMENT IN DIRECT FINANCING LEASE	ne 15.		71,682
Part IX Other Assets. See Form 990, Part X, Image (a) Descriped to the Deferred LOAN COSTS NET INVESTMENT IN DIRECT FINANCING LEASE	ne 15.		71,682 14,181,597
Part IX Other Assets. See Form 990, Part X, Image (a) Descriped to the Deferred LOAN COSTS NET INVESTMENT IN DIRECT FINANCING LEASE	ne 15.		71,682 14,181,597
Part IX Other Assets. See Form 990, Part X, Image (a) Descriped to the Deferred LOAN COSTS NET INVESTMENT IN DIRECT FINANCING LEASE	ne 15.		71,682 14,181,597
Part IX Other Assets. See Form 990, Part X, Image (a) Descriped to the Deferred LOAN COSTS NET INVESTMENT IN DIRECT FINANCING LEASE	ne 15.		71,682 14,181,597
Part IX Other Assets. See Form 990, Part X, Image (a) Descriped to the Deferred LOAN COSTS NET INVESTMENT IN DIRECT FINANCING LEASE	ne 15.		71,682 14,181,597
Part IX Other Assets. See Form 990, Part X, Image (a) Descriped to the Deferred LOAN COSTS NET INVESTMENT IN DIRECT FINANCING LEASE	ne 15.		71,682 14,181,597
Part IX Other Assets. See Form 990, Part X, Image (a) Descriped to the Deferred LOAN COSTS NET INVESTMENT IN DIRECT FINANCING LEASE	ne 15.		71,682 14,181,597
Part IX Other Assets. See Form 990, Part X, Image (a) Description of the Control	ne 15.		71,682 14,181,597
Part IX Other Assets. See Form 990, Part X, Image (a) Description of the Control	ne 15.		71,682 14,181,597
Part IX Other Assets. See Form 990, Part X, Image (a) Description of the Control	ne 15.		71,682 14,181,597
Part IX Other Assets. See Form 990, Part X, Image (a) Description DEFERRED LOAN COSTS NET INVESTMENT IN DIRECT FINANCING LEASE	ne 15.		71,682 14,181,597
Part IX Other Assets. See Form 990, Part X, Image (a) Description DEFERRED LOAN COSTS NET INVESTMENT IN DIRECT FINANCING LEASE	ne 15.		71,682 14,181,597
Part IX Other Assets. See Form 990, Part X, Im (a) Description	ne 15.		71,682 14,181,597 3,405,734
Part IX Other Assets. See Form 990, Part X, Im (a) Descrip DEFERRED LOAN COSTS NET INVESTMENT IN DIRECT FINANCING LEASE DUE FROM AFFILIATES Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	ne 15. Stion		71,682 14,181,597
Part IX Other Assets. See Form 990, Part X, Immage (a) Descripe DEFERRED LOAN COSTS NET INVESTMENT IN DIRECT FINANCING LEASE DUE FROM AFFILIATES Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X	5.)		71,682 14,181,597 3,405,734
Part IX Other Assets. See Form 990, Part X, Im (a) Descrip DEFERRED LOAN COSTS NET INVESTMENT IN DIRECT FINANCING LEASE DUE FROM AFFILIATES Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	ne 15. Stion		71,682 14,181,597 3,405,734
Part IX Other Assets. See Form 990, Part X, Immage (a) Descriped Deferred Loan Costs NET INVESTMENT IN DIRECT FINANCING LEASE DUE FROM AFFILIATES Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	5.)		71,682 14,181,597 3,405,734
Part IX Other Assets. See Form 990, Part X, Immodular (a) Description DEFERRED LOAN COSTS NET INVESTMENT IN DIRECT FINANCING LEASE DUE FROM AFFILIATES Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	5.)		71,682 14,181,597 3,405,734
Part IX Other Assets. See Form 990, Part X, Immodular (a) Description DEFERRED LOAN COSTS NET INVESTMENT IN DIRECT FINANCING LEASE DUE FROM AFFILIATES Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	5.)		71,682 14,181,597 3,405,734
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Part IX Other Assets. See Form 990, Part X, Immodular (a) Description of Liability Federal Income Taxes	5.)		71,682 14,181,597 3,405,734

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	
Part	Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Re	turn
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts 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		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
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) 4b		
c	Add lines 4a and 4b	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	per F	Return
1	Total expenses and losses per audited financial statements	₁	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
- a	Donated services and use of facilities		
b	Prior year adjustments	1	
c	Other losses	1	
d	Other (Describe in Part XIV)	1	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
Ь	Other (Describe in Part XIV) 4b	1	
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	
Par	t XIV Supplemental Information		
Com	aplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Pa	rt IV , li	nes 1b and 2b,

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

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 XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information

Ident if ier	Return Reference	Explanation
Part X	Description of Uncertain Tax Positions Under FIN 48	The Company adopted the Financial Accounting Standards Board's (FASB) authoritative guidance on accounting for uncertainty in income taxes as of January 1, 2009. The Company analyzed filing positions in all of the federal and state jurisdictions where it is required to file income tax returns, as well as all open tax years in these jurisdictions. The periods subject to examination for the Company's federal and state returns are the 2006, 2007, 2008, and 2009 tax years. The Company did not have any uncertain tax benefits and there was no effect on the Company's financial condition or results of operations as a result of implementing the authoritative guidance. It is the Company's policy to recognize interest and penalties accrued on any uncertain tax benefits as a component of income tax expense. As of the date of adoption of the FASB's authoritative guidance on accounting for uncertain tax positions and as of December 31, 2009, the Company did not have accrued interest or penalties associated with any uncertain tax benefits, nor was any interest expense recognized during the year ended December 31, 2009.

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541291124

540721690

Schedule I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

DLN: 93493152000500 OMB No 1545-0047

Department of the Treasury Internal Revenue Service

FOR AGRICULTURE IN THE CLASSROOMP O BOX

FOUNDATION 204 LITTON

bLACKSBURG, VA 24061

FOUNDATION902 PRICES FORK ROAD - 0336 bLACKSBURG, VA 24061

RICHMOND, VA 23261

27552

VIRGINIA FFA

REAVES HALL

VIRGINIA TECH

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

Inspection

General Support

General Support

Name of the organization Employer identification number VIRGINIA FARM BUREAU FEDERATION 54-0419002 Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 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. Complete if the organization answered "Yes" to 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 Part IV and Schedule I-1 (Form 990) if additional space is needed (c) IRC Code section (d) A mount of cash (e) A mount of non-(f) Method of (a) Name and address of **(b)** EIN (g) Description of (h) Purpose of grant organization ıf applıcable grant cash valuation non-cash assistance orassistance (book, FMV, appraisal or government assistance other) VIRGINIA FOUNDATION 541611426 501(C)(3) 10,978 General Support

5,000

5.880

501(C)(3)

501(C)(3)

2	Enter total number of section 501(c)(3) and government organizations	3
3	Enter total number of other organizations	0

	· · · · · · · · · · · · · · · · · · ·	
Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 9	90, Part IV, line 22
	Use Schedule I-1 (Form 990) if additional space is 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

Ident if ier	Return Reference	Explanation	

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DLN: 93493152000500

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

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

Compensation Information

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Employer identification number Name of the organization VIRGINIA FARM BUREAU FEDERATION 54-0419002 Questions Regarding Compensation Yes Νo Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain **1**b 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 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 Compensation survey or study Independent compensation consultant

During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization

Receive a severance payment or change-of-control payment? Participate in, or receive payment from, a supplemental nonqualified retirement plan?

Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.

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

The organization?

Any related organization? If "Yes," to line 5a or 5b, describe in Part III

Form 990 of other organizations

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

The organization?

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

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

If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

4a Νo 4ь Yes 4c Νo

5a 5b

6b

7

8

Approval by the board or compensation committee

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

(A) Nome	(A) Name (B) Breakdown of W-2 and/or 1099-MISC compensation		SC components:	(C) Deturement	(D) Nontovoki-	(E) Total of columns	(E) Components:	
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
WAYNE FPRYOR	(I) (II)	192,319		4,459	14,444	7,404	218,626	
	_			I			ı	

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	Ret urn Ref erence	Explanation
		Wayne Pryor \$16,500 Archie Atwell \$1,295 Janice Burton \$4,785 Emily Edmondson \$1,220 Marvin Everett \$12,951 Thomas Graves \$2,440 Robert E Hall \$1,295 David Hickman \$1,185 Evelyn Janey \$9,066 Jerry Jenkins \$13,051 Gordon Metz \$4,050 Stephen Saufley \$1,305 Edward Sharer \$10,750 Peter Trubman \$3,948 Henry Wood \$9,988 Martha Moore \$9,620

Schedule J (Form 990) 2009

DLN: 93493152000500

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009

Open to Public Inspection

Name of the organization
VIRGINIA FARM BUREAU FEDERATION

Employer identification number

54-0419002

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 6		The Virginia Farm Bureau Federation has 88 members. This is a federation of the county Farm Bureaus in Virginia Each county Farm Bureau is an autonomous body run by its own members and boards of directors. Each county Farm Bureau has approved joining with the Virginia Farm Bureau Federation and the other county Farm Bureaus in Virginia to form this federation to better serve the members of all Farm Bureaus in Virginia.
Form 990, Part VI, Section A, line 7a		MEMBERS OF THE GOVERNING BODY ARE ELECTED BY THE MEMBERS OF THE ORGANIZATION VOTING STRENGTH OF THE MEMBERS IS DETERMINED BY THE NUMBER OF PRODUCER MEMBERS WITHIN EACH COUNTY FARM BUREAU
Form 990, Part VI, Section A, line 7a		The members of the Virginia Farm Bureau Federation (88 county Farm Bureaus) have the authority to, and do, elect all the members of the board of directors. Each county Farm Bureau sends their voting representatives to a meeting of the federation. Representatives from each county Farm Bureau in a district nominate a person to sit on the board but the election is decided by all representatives of the county Farm Bureaus voting in one place at one time to elect all members of the governing body (the board of directors)
Form 990, Part VI, Section A, line 7b		The only decisions of the governing body (board of directors) which are subject to the approval of the members are those to change the Bylaw's of the Federation. The board of directors can amend the Bylaw's but any amendment is subject to ratification by the members.
Form 990, Part VI, Section A, line 8b		There are no committees of the board with authority to act in the place of the board. All standing committees are advisory to the board and are not charged with authority to act. Minutes of meetings of advisory committees of the board of directors are recorded contemporaneously and presented to the next committee meeting with any committee recommendations reported to the board of directors.
Form 990, Part VI, Section B, Inne 11		A copy of the Form 990 is provided to the members of the board of directors' Budget and Audit Committee before it is filed. They are provided a review by management staff and given an opportunity to ask any questions. Before completing the Form 990 all officers of the organization with special knowledge in the various areas covered by the Form 990 questions are asked for their review and confirmation of accuracy in the report. A copy of the Form 990 is maintained by the Secretary for the review of any members of the Board of Directors who wishes to review the form.
Form 990, Part VI, Section B, Inne 12c		The Virginia Farm Bureau's board-approved written conflict of interest policy is read and signed by each member of the board of directors, each officer, and each key staff at least once each calendar year. Copies are kept on file by the Secretary. Any forms that are signed with the notation of "with exception" are presented to the Chief Executive Officer for his review and initials. If a management decision is needed in an area where a key employee has signed their form as "with exception" that employee is expected to report that situation to their immediate supervisor, from there it is to be recorded and then reported to the Human Resources Vice President or senior management if considered material by the Human Resources Vice President. The Chief Executive Officer also chairs all of the board meetings and has knowledge of each director's "exceptions" for signed/reported conflicts. The Chief Executive Officer will ask a director to report that conflict or possible conflict to the board before voting, or be asked to recues themselves from a vote involving a possible conflict. Either action would be recorded in the minutes of the meeting.
Form 990, Part VI, Section B, Iine 15		The office of President of the Virginia Farm Bureau Federation is an elected position. Periodically, Human Resources sends the Budget and Audit Committee the President's current salary, the salary range of the position, and the average suggested increase percentage for executives based on salary survey data. The salary is reviewed and the increase is recommended by the company's Budget and Audit Committee which is made up of three of the eighteen Board of Directors. The Board of Directors reviews and approves the recommendation of the budget and audit committee. This process is reviewed during the executive session of the Board of Directors. The Secretary of the company has recorded minutes of the salary approval. This is an annual process which occurs during the fouth quarter of the year and the salary is effective January 1 of the following year. The office of the Secretary of the Virginia Farm Bureau Federation is an appointed position. A market study using salary survey data is completed by Human Resources to determine the appropriate salary range for the position. This was most recently completed in 2007. An annual performance review process (PPR) is done and the merit increase is determined based on the PPR score. The President will then submit the requested salary increase to Human Resources for processing. Documentation of the PPR rating and requested salary increase is maintained in Human Resources. This is an annual process which takes place in the fourth quarter of the year with salary increases effective January 1 of the following year.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		The Virginia Farm Bureau Federation is not required to provide the general public with its governing documents, conflict of interest policy, or financial statements. As a membership organization with 88 members of the federation (members are the County Farm Bureaus based in counties in Virginia) and through the county Farm Bureaus serving over 149,000 family memberships, with will provide to a member access to the governing documents, lists of members, financial information and minutes. A member must submit their request to the Secretary in wirting allowing up to 10 days for access. A reason must be given for the request and the documents requested must have relevance to the reason. At the annual meeting of the Virginia Farm Bureau Federation financial statements are provided to all members as well as copies of the governing documents.

FORM 990, PART XI, LINE 2b AUDIT OF FINAINCIAL STATEMENTS THE ORGANIZATION'S FINANCIAL STATEMENTS ARE AUDITED AS THE PARENT OF A CONSOLIDATED GROUP OF COMPANIES FORM 990, PART XI, LINE 2c BUDGET AND AUDIT COMMITTEE THE BUDGET AND AUDIT COMMITTEE ASSUMES RESONSIBILITY FOR OVERSITE OF THE AUDIT OF THE FINANCIAL STATEMENTS AND RECOMMENDS THE SELECTED AUDITOR TO THE FULL BOARD OF DIRECTORS FOR APPROVAL AND APPOINTMENT

Cat No 51056K

Schedule O (Form 990) 2009

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

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DLN: 93493152000500

OMB No 1545-0047

Open to Public Inspection

SCHEDULE R

(Form 990)

Department of the Treasury

Internal Revenue Service

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► Attach to Form 990. ► See separate instructions.

Related Organizations and Unrelated Partnerships

Name of the organization VIRGINIA FARM BUREAU FEDERATION **Employer identification number**

54-0419002

Part I

Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a)
Name, address, and EIN of disregarded entity

Primary activity

(c) Legal domicile (state or foreign country)

Total income

(e) End-of-year assets

(f) Direct controlling entity

Part II

Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a)
Name, address, and EIN of related organization

(b) Primary activity

(c) Legal domicile (state

or foreign country)

Exempt Code section

Public charity status (if section 501(c)(3)) Direct controlling entity

Part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(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, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(F Disproj alloca	ortionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man	(j) leral of naging rtner?	3
TOBIO LLC							Yes	No		Yes	N	ю
TOBIO LLC												
12580 WEST CREEK PARKWAY RICHMOND, VA23238 54-1973793	SUPPORT OF TRANGENIC TOBBACO (INACTIVE)	VA		UNRELATED	-7	650	1	No		Yes		

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

			<u> </u>		<u> </u>	(-)	(1-)
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
VIRGINIA FARM BUREAU HOLDING CORPORATION 12580 WEST CREEK PARKWAY RICHMOND, VA23238 54-0929947	HOLDING COMPANY	VA		С	4,078,574	1,049,095	100 000 %
VIRGINIA FARM BUREAU SERVICE CORPORATION 12580 WEST CREEK PARKWAY RICHMOND, VA23238 54-0796340	INSURANCE BROKER	VA	VIRGINIA FARM BUREAU HOLDING COPORATION	С	1,322,170	5,011,428	
VIRGINIA FARM BUREAU INSURANCE AGNCY INC 12580 WEST CREEK PARKWAY RICHMOND, VA23238 54-0929948	INSURANCE BROKER	VA	VIRGINIA FARM BUREAU HOLDING COPORATION	С	-58,312	816,042	
EMPLOYEES BENFIT CORPORATION OF AMERICA 12580 WEST CREEK PARKWAY RICHMOND, VA23238 54-2015926	INSURANCE BROKER	VA	VIRGINIA FARM BUREAU HOLDING COPORATION	С	5,965,535	10,439,551	
CUSTOM HEALTH CARE INC 12580 WEST CREEK PARKWAY RICHMOND, VA23238 03-0382095	INSURANCE BROKER	VA	VIRGINIA FARM BUREAU HOLDING COPORATION	С	35,171	28,351	
ORGANIZATIONAL MANAGEMENT INC 12580 WEST CREEK PARKWAY RICHMOND, VA23238 41-2071427	Marketing Service	VA	VIRGINIA FARM BUREAU HOLDING COPORATION	С	7,733	239,972	
Virginia Farm Bureau Marketing Association 12580 WEST CREEK PARKWAY RICHMOND, VA23238 54-0700947	Agricultural Service	VA		С	-341	11,866	100 000 %

(3)

(4)

(5)

(6)

Sche	edule R (Form 990) 2009		Рa	ge 3
Pa	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)			
	Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
1 D	Ouring 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	Yes	
b	Gift, grant, or capital contribution to other organization(s)	1b		No
С	Gift, grant, or capital contribution from other organization(s)	1c		No
d	Loans or loan guarantees to or for other organization(s)	1d		No
e	Loans or loan guarantees by other organization(s)	1e		No
f	Sale of assets to other organization(s)	1f		No
g	Purchase of assets from other organization(s)	1g		No
h	Exchange of assets	1h		No
i	Lease of facilities, equipment, or other assets to other organization(s)	1i		No
j	Lease of facilities, equipment, or other assets from other organization(s)	1j		No
k	Performance of services or membership or fundraising solicitations for other organization(s)	1k		No
- 1	Performance of services or membership or fundraising solicitations by other organization(s)	11		No
m	n Sharing of facilities, equipment, mailing lists, or other assets	1m		No
n	Sharing of paid employees	1n		No
o	Reimbursement paid to other organization for expenses	10		No
р	Reimbursement paid by other organization for expenses	1р		No
q	O ther transfer of cash or property to other organization(s)	1q		No
r	O ther transfer of cash or property from other organization(s)	1r		No
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			
	(a) Name of other organization (b) Transaction type(a-r)		(c) t ınvolv	ed
(1) S (2)	See Additional Data Table			

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

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

(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?

Yes No

(e) Share of end-of-year assets **(f)** Disproprtionate allocations?

No

Yes

(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) (h) General or managing partner?

Yes No

Software ID: Software Version:

EIN: 54-0419002

Name: VIRGINIA FARM BUREAU FEDERATION

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income (\$)	(g) Share of end-of-year assets (\$)	(h) Percentage ownership
VIRGINIA FARM BUREAU HOLDING CORPORATION 12580 WEST CREEK PARKWAY RICHMOND, VA23238 54-0929947	HOLDING COMPANY	VA		c	4,078,574	1,049,095	100 000 %
VIRGINIA FARM BUREAU SERVICE CORPORATION 12580 WEST CREEK PARKWAY RICHMOND, VA23238 54-0796340	INSURANCE BROKER	VA	VIRGINIA FARM BUREAU HOLDING COPORATION	С	1,322,170	5,011,428	
VIRGINIA FARM BUREAU INSURANCE AGNCY INC 12580 WEST CREEK PARKWAY RICHMOND, VA23238 54-0929948	INSURANCE BROKER	VA	VIRGINIA FARM BUREAU HOLDING COPORATION	С	-58,312	816,042	
EMPLOYEES BENFIT CORPORATION OF AMERICA 12580 WEST CREEK PARKWAY RICHMOND, VA23238 54-2015926	INSURANCE BROKER	VA	VIRGINIA FARM BUREAU HOLDING COPORATION	С	5,965,535	10,439,551	
CUSTOM HEALTH CARE INC 12580 WEST CREEK PARKWAY RICHMOND, VA23238 03-0382095	INSURANCE BROKER	VA	VIRGINIA FARM BUREAU HOLDING COPORATION	С	35,171	28,351	
ORGANIZATIONAL MANAGEMENT INC 12580 WEST CREEK PARKWAY RICHMOND, VA23238 41-2071427	Marketing Service	VA	VIRGINIA FARM BUREAU HOLDING COPORATION	С	7,733	239,972	
Virginia Farm Bureau Marketing Association 12580 WEST CREEK PARKWAY RICHMOND, VA23238 54-0700947	A gricultural Service	VA		С	-341	11,866	100 000 %

Form 990, Schedule R, Part V - Transactions With Related Organizations

	(a) Name of other organization	(b) Transaction type(a-r)	(c) A mount Involved (\$)
(1)	VIRGINIA FARM BUREAU HOLDING CORPORATION	A	1,473
(2)	VIRGINIA FARM BUREAU SERVICE CORPORATION	А	1,014,034
(3)	VIRGINIA FARM BUREAU INSURANCE AGENCY INC	А	1,213
(4)	EMPLOYEE BENEFITS CORPORATION OF AMERICA	А	1,102
(5)	Custom Health Care Inc	А	- 37
(6)	O rganizational Management Inc	А	36
(7)	Virgina Farm Bureau Marketing Association	A	-17

Additional Data

Software ID: Software Version:

EIN: 54-0419002

Name: VIRGINIA FARM BUREAU FEDERATION

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$ including grants of \$) (Revenue \$ WOMEN & YOUNG FARMERS PROGRAMS (Code) (Expenses \$ including grants of \$) (Revenue \$ GROUP PURCHASING (Code) (Expenses \$ including grants of \$) (Revenue \$ PROGRAM DEVELOPMENT)) (Revenue \$	including grants of \$) (Expenses \$	(Code
WOMEN & YOUNG FARMERS PROGRAMS (Code) (Expenses \$ including grants of \$) (Revenue \$ GROUP PURCHASING (Code) (Expenses \$ including grants of \$) (Revenue \$				ICES	COMMODITY SERV
(Code) (Expenses \$ including grants of \$) (Revenue \$ GROUP PURCHASING (Code) (Expenses \$ including grants of \$) (Revenue \$)) (Revenue \$	including grants of \$) (Expenses \$	(Code
GROUP PURCHASING (Code) (Expenses \$ including grants of \$) (Revenue \$				ARMERS PROGRAMS	WOMEN & YOUNG F
(Code) (Expenses \$ including grants of \$) (Revenue \$)) (Revenue \$	including grants of \$) (Expenses \$	(Code
				NG	GROUP PURCHASIN
PROGRAM DEVELOPMENT)) (Revenue \$	including grants of \$) (Expenses \$	(Code
				PMENT	PROGRAM DEVELO
(Code) (Expenses \$ including grants of \$) (Revenue \$)) (Revenue \$	including grants of \$)(Expenses\$	(Code

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and	(B)							(D)	/E)	(E)
(A) Name and Title	A verage hours		tion (that a	che		II		Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
WAYNE F PRYOR PRESIDENT	40 00	Х		Х				196,778	0	21,848
EDWARD A SHARER VICE PRSIDENT	2 00	X		х				4,164	0	14,407
ARCHIE B ATWELL DIRECTOR	2 00	Х						11,969	0	3,158
JANICE A BURTON DIRECTOR	2 00	Х						8,478	0	6,973
EMILY F EDMONDSON DIRECTOR	2 00	Х						12,356	0	2,478
MARVIN L EVERETT JR DIRECTOR	2 00	X						626	0	14,483
THOMAS E GRAVES JR DIRECTOR	2 00	Х						11,136	0	3,717
ROBERT E HALL DIRECTOR	2 00	Х						12,281	0	3,158
DAVID L HICKMAN DIRECTOR	2 00	Х						11,291	0	2,931
EVELYN H JANEY DIRECTOR	2 00	Х						4,198	0	11,374
JORDAN M JENKINS DIRECTOR	2 00	Х						313	0	17,476
GORDON R METZ DIRECTOR	2 00	Х						9,976	0	6,167
SSTEPHEN L SAUFLEY DIRECTOR	2 00	X						12,371	0	3,177
H CARL TINDER SR DIRECTOR	2 00	Х						13,577	0	0
PETER A TRUBAN DIRECTOR	2 00	X						5,103	0	4,559
JOSEPH H WILLIAMS DIRECTOR	2 00	X						13,577	0	0
HENRY E WOOD JR DIRECTOR	2 00	X						3,589	0	12,594
JAMES A YANKEY DIRECTOR	2 00	X						13,577	0	0
JONATHAN S SHOUSE SECRETARY	40 00			X				109,754	0	23,567
JEFFREY W DILLON TREASURER	4 00			X				0	0	0
DAVID A PRIDDY ASST TREASURER	4 00			Χ				0	0	0
PEGGY L MCCLELLAND ASST TREASURER	4 00			Χ				0	0	0
Gregory K Hicks HIGHEST COMPENSATED EMPL	40 00					X		105,882	0	11,446
ALBERT K GLASS HIGHEST COMPENSATED EMPL	40 00					X		108,712	0	12,659
MARTHA A MOORE HIGHEST COMPENSATED EMPL	40 00					X		113,096	0	19,724

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) A verage hours		(tion that a	•	/)			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
James B Lowery III HIGHEST COMPENSATED EMPL	40 00)				Х		100,256	O	12,288

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
STATE & FEDERAL INCOME	-8,606			
PRINTING & PUBLICATIONS	273,593			
EQUIPMENT RENT & MAINTE	234,167			
YOUNG FARMER ACTIVITIES	103,235			
WO MEN'S A CTIVITIES	91,937			