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Form **990-EZ**Department of the Treasury
Internal Revenue Service**Short Form**
Return of Organization Exempt From Income TaxUnder section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

- Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.
- The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-1150

2009**Open to Public Inspection****A For the 2009 calendar year, or tax year beginning , and ending****B** Check if applicable:

- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Termination
- ☐ Amended return
- ☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization**DARLINGTON COUNTY FARM BUREAU**

Number and street (or P O box, if mail is not delivered to street address)

PO BOX 123

Room/suite

City or town, state or country, and ZIP + 4

DARLINGTON**SC 29540-0123****D** Employer identification number**57-0341977****E** Telephone number**803-796-6700****F** Group Exemption Number**2393**

- **Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).**

G Accounting method ☒ Cash ☐ Accrual

Other (specify) ►

I Website: ► **N/A****J** Tax-exempt status (check only one) — ☒ 501(c) (**5**) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527**H** Check ☒ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)**K** Check ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ. ► \$ **158,064****Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See the instructions for Part I.)

1	Contributions, gifts, grants, and similar amounts received	1	66,844
2	Program service revenue including government fees and contracts	2	546
3	Membership dues and assessments	3	
4	Investment income	4	1,347
5a	Gross amount from sale of assets other than inventory	5a	
b	Less: cost or other basis and sales expenses	5b	
c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
6	Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here <input type="checkbox"/>		
a	Gross revenue (not including \$ _____ of contributions reported on line 1)	6a	
b	Less: direct expenses other than fundraising expenses	6b	
c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	
7a	Gross sales of inventory, less returns and allowances	7a	
b	Less: cost of goods sold	7b	
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
8	Other revenue (describe ► See Statement 1)	8	89,327
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	158,064
10	Grants and similar amounts paid (attach schedule) Stmt 2	10	25,165
11	Benefits paid to or for members	11	
12	Salaries, other compensation, and employee benefits	12	74,948
13	Professional fees and other payments to independent contractors	13	
14	Occupancy, rent, utilities, and maintenance	14	32,086
15	Printing, publications, postage, and shipping	15	
16	Other expenses (describe ► See Statement 3)	16	25,144
17	Total expenses. Add lines 10 through 16	17	157,343
18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	721
19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	247,778
20	Other changes in net assets or fund balances (attach explanation) See Statement 4	20	78
21	Net assets or fund balances at end of year Combine lines 18 through 20	21	248,577

Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ

(See the instructions for Part II.)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	91,841	91,110
23 Land and buildings	7,000	7,000
24 Other assets (describe ► See Statement 5)	150,981	152,546
25 Total assets	249,822	250,656
26 Total liabilities (describe ► See Statement 6)	2,044	2,079
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	247,778	248,577

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

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Part III Statement of Program Service Accomplishments (See the instructions for Part III.)

What is the organization's primary exempt purpose?

IMPROVE AGRICULTURE

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.

Expenses

(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)

28 PROVIDED SPACE & SERVICES FOR MEETINGS AND A CENTRAL
LOCATION FOR THE DISSEMINATION OF INFORMATION PROMOTING
THE IMPROVEMENT OF AGRICULTURE

(Grants \$) If this amount includes foreign grants, check here

28a

29 SPONSORED VOLUNTEER AGRICULTURAL LEADERS AT MEETINGS OF
INTEREST TO THE AGRICULTURAL COMMUNITY

(Grants \$) If this amount includes foreign grants, check here

29a

30 SPONSORED COUNTY OFFICERS' ATTENDANCE TO REPRESENT THEIR
COUNTY IN STATE AND NATIONAL EVENTS

(Grants \$) If this amount includes foreign grants, check here

30a

31 Other program services (attach schedule) **See Statement 7**

(Grants \$) If this amount includes foreign grants, check here

31a

32 Total program service expenses (add lines 28a through 31a)

32

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated. (See the instructions for Part IV.)

[illegible]

Part V Other Information (Note the statement requirements in the instructions for Part V.)

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
34 Were any changes made to the organizing or governing documents? If "Yes," attached a conformed copy of the changes		X
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T		
a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	X	
b If "Yes," has it filed a tax return on Form 990-T for this year?	X	
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		X
37a Enter amount of political expenditures, direct or indirect, as described in the instr 37a		
b Did the organization file Form 1120-POL for this year?		X
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?		X
b If "Yes," complete Schedule L, Part II and enter the total amount involved 38b		
39 Section 501(c)(7) organizations Enter		
a Initiation fees and capital contributions included on line 9 39a		
b Gross receipts, included on line 9, for public use of club facilities 39b		
40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 40a , section 4912 40a , section 4955 40a		
b Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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 40b		
c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 40c		
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization 40d		
e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T 40e		X
41 List the states with which a copy of this return is filed. SC		
42a The organization's books are in care of SC FARM BUREAU Telephone no 803-796-6700		
Located at BOX 754 COLUMBIA SC ZIP + 4 29202-0754		
b 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)?		X
If "Yes," enter the name of the foreign country: SC		
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
c At any time during the calendar year, did the organization maintain an office outside of the U.S.? 42c		X
If "Yes," enter the name of the foreign country SC		
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here 43		
and enter the amount of tax-exempt interest received or accrued during the tax year 43		
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ 44		X
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ 45		X

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Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

	Yes	No
46 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		
47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		
48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		
49a Did the organization make any transfers to an exempt non-charitable related organization?		
49b If "Yes," was the related organization a section 527 organization?		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

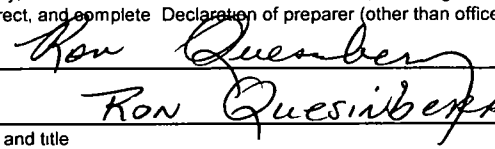
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances

f Total number of other employees paid over \$100,000 ▶

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation

d Total number of other independent contractors each receiving over \$100,000 ▶

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.			
	 Signature of officer		Date 3/30/10 Tax Officer	
Paid Preparer's Use Only	Preparer's signature		Date	Preparer's Identifying Number (See instr.)
	Firm's name (or yours if self-employed), address, and ZIP + 4 SC Farm Bureau Federation 724 Knox Abbott Dr Cayce, SC 29033		03/30/10	Check if self-employed <input type="checkbox"/>
	EIN ▶ Phone no 803-936-4676		May the IRS discuss this return with the preparer shown above? See instructions ▶ <input type="checkbox"/> Yes <input type="checkbox"/> No	

Form **990-EZ** (2009)

Federal Statements**Statement 1 - Form 990-EZ, Part I, Line 8 - Other Revenue**

<u>Description</u>	<u>Amount</u>
SERVICE FEES FROM AFFILIATE	\$ 89,327
Total	\$ 89,327

Federal Statements**Statement 2 - Form 990-EZ, Part I, Line 10 - Payments to Affiliates**

Name and Address	Purpose	Amount of Payment
SC FARM BUREAU PO BOX 754 COLUMBIA, SC 29202	STATE DUES	24,465
Total		<u>24,465</u>

Federal Statements**Statement 3 - Form 990-EZ, Part I, Line 16 - Other Expenses**

Description	Amount
Expenses	\$
Office	14,627
Conferences/Meetings	10,444
Interest	73
Total	<u>\$ 25,144</u>

Statement 4 - Form 990-EZ, Part I, Line 20 - Other Changes in Net Assets or Fund Balances

Description	Amount
AUDIT ADJUSTMENTS	\$ 78
Total	<u>\$ 78</u>

Statement 5 - Form 990-EZ, Part II, Line 24 - Other Assets

Description	Beginning of Year	End of Year
BUILDINGS/FURNITURE/EQUIPMENT	\$ 154,271	\$ 155,836
Less Accumulated Depreciation	3,290	3,290
	<u>150,981</u>	<u>152,546</u>

Statement 6 - Form 990-EZ, Part II, Line 26 - Total Liabilities

Description	Beginning of Year	End of Year
PAYROLL TAX LIABILITIES	\$ 2,044	\$ 2,079
	<u>2,044</u>	<u>2,079</u>

Federal Statements

**Statement 7 - Form 990-EZ, Part III, Line 31 - Statement of Program Service
Accomplishments**

Description

PROVIDED FUNDS FOR AGRICULTURAL EDUCATION

2009-2010 DARLINGTON COUNTY FARM BUREAU OFFICERS AND DIRECTORS

PO Drawer 123 • Darlington, SC 29540 • 843.393.6178

Hartsville Office • PO Box 760 • Hartsville, SC 29551 • 843 332.0462

Office	Name	Member #	Address, City & Zip	Home Phone #	Office Phone #	Fax #	Mobile Phone #	E-Mail Address
President	Les Galloway	466281	2021 Timmonsville Highway, Darlington, 29532	843 398 0988	843 393 1936		843 616 0013	lgalloway@sc.rr.com
Vice President	William Chapman	496116	298 Lakeside Drive, Hartsville, 29550	843 335.6094	843 332 4528		843 858 1086	
Vice President	David Gunter	195686	Pee Dee Research & Education Center, 2200 Pocket Rd, Florence, 29506	843 622 3491	843 393 0484	843 393 9428	843 616 2133	dgunter@clemson.edu
Secretary-Treasurer	Theron DeWitt	267682	2036 Timmonsville Highway, Darlington, 29532	843 393 5031	843 393 2919			ssdewitt@aol.com
Pee Dee District Vice President	Frank M. Flowers	207225	1400 Black Creek Road, Darlington, 29540	843 393 3229	843 307 1671	843.393 0812	843 307.1671	
State Director	David DeWitt	103125	2626 Timmonsville Highway, Darlington, 29532	843 393 3439	843.393 2919		843 229 7994	dbdewitt@aol.com
State Director	Johnny Ross	612786	4365 Running Brook Road, Darlington, 29532	843 393 5648			843 307 6123	
Alternate State Director	Tommy Chaplin	706873	839 Bethlehem Road, Hartsville, 29550	843 332 5998	843 339 9970	843 339 9439	843 307 6551	chaplins4@bellsouth.net
Legislative Committee Chair	Alvin DeWitt	207176	4633 Hoffmeyer Road, Darlington, 29532	843 393 5780	843.393 2919	843 395 8022	843 618 8889	
Young Farmers & Ranchers Chair	Ryan Galloway	834609	2045 Timmonsville Highway, Darlington, 29532	843 393 2412	843 393 1936		843 992 0962	rdgfarm@yahoo.com
Women's Committee Chair	Judy Barefoot	172203	2244 Byrdtown Road, Hartsville, 29550	843 332 8117	843 383 7309	843 339 7309	843 857 8553	
Information/Public Relations Chair	David DeWitt	103125	2626 Timmonsville Highway, Darlington, 29532	843 393 3439	843.393 2919		843 229 7994	dbdewitt@aol.com
County Director	Don Boice	830942	901 Boice Drive, Timmonsville, 29161		843 307 5901			
County Director	Hoyt Campbell	415156	1448 High Point Road, Hartsville, 29550	843 332 1960	843 398 4900	843 398 4907	843 857 7528	

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Office	Name	Member #	Address, City & Zip	Home Phone #	Office Phone #	Fax Phone #	Mobile Phone #	E-Mail Address
County Director	James Chapman	621135	2073 Bethlehem Road, Hartsville, 29550	843 332 4528				
County Director	William Chapman	496116	298 Lakeside, Hartsville, 29550	843 335 6094	843 332 4528		843 858 1086	
County Director	Rollins Culpepper	717333	117 Kalber Drive, Hartsville, 29550	843 332 7911				
County Director	Edwin Dargan, Jr	278308	PO Box 45, Darlington, 29532	843 395 1425	843 616 3300	843 393 6767	843 307 3300	darganw@bellsouth.net
County Director	James Dargan	808420	1224 S Charleston Road, Darlington, 29532	843 661 5988				
County Director	W E Dargan, III	388012	1306 S Charleston Road, Darlington, 29532	843 395 9185				
County Director	Alvin DeWitt	207178	4633 Hoffmeyer Road, Darlington, 29532	843 393 5780	843 393 2919	843 395 8022	843 618 8889	
County Director	Theron DeWitt	267682	2036 Timmons Highway, Darlington, 29532	843 393 5031	843 393 2919			ssdewitt@aol.com
County Director	Ray Galloway	621303	1925 Timmons Highway, Darlington, 29532	843 393 6502	843 393 1936	843 393 1936	843 339 1005	rgalloway8@sc.rr.com
County Director	Ryan Galloway	834609	2045 Timmons Highway, Darlington, 29532	843 393 6502	843 393 1936			
County Director	Craig Gandy	150958	734 Montclare Road, Darlington, 29540	843 393 9314	843 393 1936		843 339 7477	
County Director	Robert Griggs	240186	2557 Bethlehem Road, Hartsville, 29550	843 332 6915	843 332 0151		843 307 7608	
County Director	David Gunter	195686	300 Russell Street, Darlington, 29532	843 662 3491	843 393 0484	843 393 9428	843 616 2133	dgunter@clermson.edu
County Director	Scott Hoffmeyer	265850	3860 Cherry Wood Road, Florence, 29501	843 665 2350			803.621 3103	
County Director	Robert Pitts	247007	PO Box 148, Lydia, 29079	843 332 5785	843 332 1511	843 332 1595	843 615 5858	rgpitts@lydiasc.net
County Director	John Rogers	612513	2056 E Home Avenue, Hartsville, 29550	843 332 0878	843 383 4707	843 383 4725		

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Office	Name	Member #	Address, City & Zip	Home Phone #	Office Phone #	Fax Phone #	Mobile Phone #	E-Mail Address
County Director	Jack K Stewart, Jr	631716	6733 Oates Highway, Timmonsville, 29161	843 346 3984			843 687 3142	
County Director	Mitch Tyner	612708	3437 Lake Swamp Road, Darlington, 29532	843 393 8614	843 992 3089			rtatlyner@bellsouth.net
County Director	A F Woodard, III	684576	600 Pinedale Drive, Darlington, 29532	843.393.3329	843 393 1625		843.621 4072	
County Director	Ty Woodard	860802	483 Shearin Street, Darlington, 29532	843 621 1932			843 621 1932	
County Director	Wes Woodard	840910	112 Gann Drive, Darlington, 29532	843 307 6109				
County Director	Richard J Young	223396	205 W Horse Branch Trail, Darlington, 29540	843 393 4462				