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Form 990-EZ

# Short Form 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)

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

Dep	artment o	of the Treasury	-	assets less than \$1,250,000  The organization may have to use a co	at the end py of this	return to sa	may i	state repor	ting require	ements		Inspection
A			lar year.	or tax year beginning	and en							
В		applicable	Please	C Name of organization						D	Emp	loyer identification number
	Address	change	use IRS							i		
	Name ch	nange	label or print or	LANCASTER COUNTY FARM	M BU	REAU					<u>57</u>	<u>-0350642</u>
	Initial ret	turn	type.	Number and street (or P O box, if mail is not deli-	vered to s	treet addres	ss)		Room/su	ite E		phone number
	Termina	tion	See Specific	PO BOX 2228								<u>3-796-6700                                  </u>
	Amende	d return	Instruc-	City or town, state or country, and ZIP + 4						F		up Exemption
		ion pending	tions.	LANCASTER		2972		2228	<u> </u>		Num	
_	<ul><li>Sect</li></ul>	tion 501(c)(3	-	zations and 4947(a)(1) nonexempt charital	ole trust	s must att	tach		G Acco	<u> </u>		X Cash Accrual
9		. 37/		npleted Schedule A (Form 990 or 990-EZ).					Other (sp			
<b>R</b>		te: ▶ <u>N/</u>	-	<b>T 504</b> () ( <b>5</b> ) <b>4</b> ( ) ( )	104	7/-1/41		507	H Chec	red to all	ach Sch	e organization is <b>not</b> nedule B (Form 990,
<u>-</u>		empt status (ch				7(a)(1) or		527		EZ, or 99		more than \$25,000. A
νK	Check	P ∐		ganization is not a section 509(a)(3) support								more than \$25,000. A
₹_				eturn is not required, but if the organization of to determine gross receipts, if \$500,000 or more, fi					o ille a G	Jilipiele	<b>▶</b> \$	131,349
<u> </u>	Part I	Poven	b, to line s	penses, and Changes in Net Asso	ete or	Fund Ra	alan	ces (S	ee the	instruc		
	1			nts, and similar amounts received	- CO OI	i una De	aidii	<u></u>	00 1110	ii ioti ac	1 1	61,666
CONTRIVE DE	2			enue including government fees and contrac	ts	•					2	66
	3	J		nd assessments							3	
2	4	Investment		nd dobbosmonto							4	355
3	5a			sale of assets other than inventory		1	5a					
5	Ь			pasis and sales expenses			5b					
	c	Gain or (loss)	from sale	of assets other than inventory (Subtract line 5b from	n line 5a)						5c	
<b>⊇</b> §	6	Special events and activities (complete applicable parts of Schedule G) If any amount is from <b>gaming</b> , check here										
	а	•			ontributi					_	8	
<b>2010</b> Revenue	Ì	reported on	line 1)			L	6a				<b>」</b> │	
<b>⊘</b>	b	Less direct	expense	es other than fundraising expenses			6b					
œ	С	Net income	or (loss)	from special events and activities (Subtract	lıne 6b f	from line 6	a) ု				6c	
AP	7a	Gross sales	of inver	ntory, less returns and allowances			7a				4	
Ω	b	Less: cost of	-			_	7b					
Щ	С			) from sales of inventory (Subtract line 7b fro	m line 7	a)					7c	60 262
ź	8			cribe ► See Statement 1							8	69,262
SCANNED	9_			lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	3 F	RF(	CF	IVED			9	131,349 21,613
တ	10			mounts paid (attach schedule) Stmt	2				$\neg o$		10	21,013
	11	Benefits par			2		0 E	5 2010	OSO		12	60,543
es	12			pensation, and employee benefits nd other payments to independent contractor	183	APR	0 5	2010	ומו		13	00,343
Expense	13 . 14			id other payments to independent contractor litres, and maintenance	<b>"</b>				<u> </u>		14	32,077
EX	15			s, postage, and shipping	į	<b>OGI</b>	DE.	N, U			15	<u> </u>
	16			scribe > See Statement 3		<del></del>			<del></del>	)	16	18,044
	17	•	,	ld lines 10 through 16	*-		•				17	132,277
	18			or the year (Subtract line 17 from line 9)							18	-928
ets	19			palances at beginning of year (from line 27, c	olumn (/	A)) (must a	agree	with				
Ass				eported on prior year's return)							19	190,443
Net Assets	20	Other chang	ges in ne	et assets or fund balances (attach explanatio	n)						20	
	21	Net assets	or fund b	palances at end of year Combine lines 18 th	rough 20	)				<u> </u>	21	189,515
	Part II	Balan	ce She	eets. If Total assets on line 25, column (B)	are \$1,2	50,000 or i	more	, file For	m 990 ins	stead of	Form 9	
				(See the instructions for Part II)			ŀ	(A) E	Beginning		,	(B) End of year
		savings, and	ınvestm	ents			,		19	,939		19,011
		and buildings	_						170	E 0 4	23	170 504
			nbe 🕨	See Statement 4			—)			,504		170,504 189 515
	Total a						_ ,		190	<u>,443</u>		189,515
		liabilities (des		es (line 27 of column (B) must agree with line	21\		一'}		190	,443		189,515
41	INGL 85	ocus vi iuna	vaidiiCE	sa ume 27 di Goldini (D7 <b>iliuat a</b> gice Willi Ilik	11		,	,		,	- 4	

Form **990-EZ** (2009

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

Form 990-EZ (2009) LANCASTER COUNTY FARM BUREAU		-0350642				Page 2
Part III Statement of Program Service Accomplishments (S	See the instruc	tions for Part	III.)	1	•	enses
What is the organization's primary exempt purpose?				(R	equired f	for section
IMPROVE AGRICULTURE				50	1(c)(3) a	nd 501(c)(4)
Describe what was achieved in carrying out the organization's exempt purposes. In a				org	ganızatıo	ns and section
manner, describe the services provided, the number of persons benefited, or other r	elevant information	for		49	47(a)(1)	trusts; optional
each program title.				for	r 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, ch	eck here	•		28a		
29 SPONSORED VOLUNTEER AGRICULTURAL LEADERS AT MEETINGS OF						<del>-</del>
INTEREST TO THE AGRICULTURAL COMMUNITY					ĺ	
					ĺ	
(Grants \$) If this amount includes foreign grants, ch	eck here	•	广	29a		
30 SPONSORED COUNTY OFFICERS' ATTENDANCE TO REPRESENT THEIR				<u> </u>		
COUNTY IN STATE AND NATIONAL EVENTS						
COUNTY IN STATE AND RATIONAL EVENTS					1	
(Grants \$ ) If this amount includes foreign grants, ch	eck here	•	_	1 30a	1	
·	eck fiele					<del></del>
C. Caro. p. G. am co. March (contract)	and horo	_		31a		
(Grants \$ ) If this amount includes foreign grants, ch	leck here		_	32	<b></b>	<del></del>
32 Total program service expenses (add lines 28a through 31a)			20.41			r Dort IV )
Part IV List of Officers, Directors, Trustees, and Key Employees. List ea	(b) Title and average	compensated (S		d) Contrib	outions to	(e) Expense
(a) Name and address	hours per week	(If not paid,	em	iployee ben	efit plans &	account and
	devoted to position	enter -0)	1 00	eferred corr	pensation	other allowances
SEE ATTACHED LIST	PRESIDENT					
	*****		<u>위</u>			<u> </u>
SEE ATTACHED LIST	OTHER OFFICE	RS 				_
		·	<u>위</u>			0
SEE ATTACHED LIST	DIRECTORS					
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	<u> </u>	1				
DAA					Fo	m <b>990-EZ</b> (2009)

and enter the amount of tax-exempt interest received or accrued during the tax year

"Yes," Form 990 must be completed instead of Form 990-EZ

Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of

Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If

Form **990-EZ** (2009)

44

Yes

No

X

43

45

Form 990-EZ

Form 990-EZ					0642				Page 4
Part VI	Section 501(c)(3) organizations and section								
	501(c)(3) organizations and section 4947(a)(	(1) nonexempt	charitab	le trus	ts must a	answe	er questic	ons 46-	49b
	and complete the tables for lines 50 and 51.			. <u> </u>					
46 Did the	organization engage in direct or indirect political campaign a	activities on behalf	of or in opp	osition t	0			Y	es No
	ates for public office? If "Yes," complete Schedule C, Part I							46	
47 Did the	organization engage in lobbying activities? If "Yes," complet	te Schedule C, Par	t II					47	
48 Is the o	rganization operating a school as described in section 170(b	o)(1)(A)(II)? If "Yes,	" complete	Schedul	еE			48	
49a Did the	organization make any transfers to an exempt non-chantabl	le related organiza	tion?					49a	
b If "Yes,	was the related organization a section 527 organization?							49b	
50 Comple	ete this table for the organization's five highest compensated	employees (other	than office	rs, direct	ors, truste	es and	key		
employ	ees) who each received more than \$100,000 of compensation	on from the organiz	zation If the	ere is no	ne, enter "				
	(a) Name and address of each employee paid more than \$100,000	hour	e and average s per week d to position	(c) Com	pensation	employee	ntributions to benefit plans & compensation	(e) Ex accou other all	
						<del></del> -			
f Total n	umber of other employees paid over \$100,000		. 🕨						
	00 of compensation from the organization. If there is none, e  Name and address of each independent contractor paid more than \$1	· · · · · · · · · · · · · · · · · · ·	(b)	Type of	service		(c) C	ompensat	on
				<del></del>					
								. —	
d Total n	umber of other independent contractors each receiving over	\$100,000				l.			
Sign Here	Under penalties of perjury, I declare that I have examined this return and belief, it is true, correct, and complete Declaration of preparer Signature of officer	(other than officer) is	based on all	ınformatı	tatements, a on of which is ate	and to the preparer	e best of my l	knowledge wledge	
	Type or print name and title	- Cray				<u> </u>	7-		
Paid	Preparer's signature		Date 03/30	/10	Check if self-	<u> </u>	Preparer's Ideni	afying Numb	er (See instr.)
reparer's	.  <del></del>			,, <u> </u>	employed >				
Use Only	Timo name (or yours		•			EIN			
JJU Jilly			_			Pho		_026	_1676
May the IDS	discuss this return with the preparer shown above? See inst		_			no	<u>▶ 803</u>	Yes	-4676 □ No
may the IRS	Grandes and return with the brebarer Shown above? See Inst						<u>_</u>		FZ (2009)

3/30/2010 8:58 AM

29 LANCASTER COUNTY FARM BUREAU

57-0350642

Federal Statements

FYE: 12/31/2009

### Statement 1 - Form 990-EZ, Part I, Line 8 - Other Revenue

Description	 Amount
SERVICE FEES FROM AFFILIATE	\$ 69,262
Total	\$ 69,262

						 	 _	 
3/30/2010 8:58 AM								. 5
Federal Statements	Statement 2 - Form 990-EZ, Part I, Line 10 - Payments to Affiliates	Amount of Purpose	STATE DUES 20,517					
29 LANCASTER COUNTY FARM BUREAU 57-0350642 FYE: 12/31/2009	Statement 2 -	Name and Address	SC FARM BUREAU PO BOX 754 COLUMBIA, SC 29202	Tocal				

3/30/2010 8:58 AM`

# 29 LANCASTER COUNTY FARM BUREAU 57-0350642 **Federa**

FYE: 12/31/2009

### **Federal Statements**

### Statement 3 - Form 990-EZ, Part I, Line 16 - Other Expenses

Description	 Amount
Expenses Office Conferences/Meetings Interest	\$ 12,403 5,305 336
Total	\$ 18,044

### Statement 4 - Form 990-EZ, Part II, Line 24 - Other Assets

Description	I	Beginning of Year	 End of Year
BUILDINGS FURNITURE/FIXTURES Less Accumulated Depreciation MISCELLANEOUS	\$	160,432 9,789 817 1,100 170,504	\$  160,432 9,789 817 1,100 170,504

29 LANCASTER COUNTY FARM BUREAU 57-0350642

**Federal Statements** 

3/30/2010 8:58 AM\*

FYE: 12/31/2009

## Statement 5 - Form 990-EZ, Part III, Line 31 - Statement of Program Service Accomplishments

Description

PROVIDED FUNDS FOR AGRICULTURAL EDUCATION

# 2009-2010 LANCASTER COUNTY FARM BUREAU OFFICERS AND DIRECTORS

PO Box 2228 • Lancaster, SC 29721 • 803 283.9908

Office	Name	Member #	Address, City & Zip	Home Phone #	Office Phone #	Fax#	Mobile Phone #	E-Mail Address
President	Scott Croxton	697400	1389 Kershaw Country Club Rd, Kershaw, 29067	803 475 2827	803 475 43:)7		803 669 3390	scottcroxtonfam@mindspring com
Vice President	Robert Yoder, Jr	623014	PO Box 183, Van Wyck, 29744	803 285 4503	803 285 3377	803 283 7908	803 289 9166	
Secretary-Treasurer	Billy Catoe	260194	2463 J Funderburk Road, Lancaster, 29720	803 286 7111	803 286 7111		803 287 2411	
State Director	Douglas Barfield	623744	PO Box 126, Kershaw, 29067	803 475 7695	803 475 5810		803 320 0528	dlbarfield@windstream net
Alternate State Director	Scott Croxton	697400	1389 Kershaw Country Club Road, Kershaw, 29067	803 475 2827	803 475 4307		903 669 3390	scottcroxtonfam@mindspring com
Legislative Committee Chair		:						
Young Farmers & Ranchers Chair								
Women's Committee Chair								
Information/Public Relations Chair	Arthur Eugene Harper	67536	845 W Doc Garris Road, Lancaster, 29720	803 285 1853	803 285 2051	803 286 5827	803 320.0177	
County Director	Barry Blackmon	664762	1152 Duckwood Road, Lancaster, 29720	803 286 0041	803 286 0(141		803 283 7175	beblackmon@icomporium net
County Director	Luke Croxton	852549	5737 Ussery Road, Kershaw, 29067	803 427 4273				
County Director	Dean Elliott	269522	2548 Knotty Pines Drive, Lancaster, 29720	803.283 9322				
County Director	Harold M Funderburk	378574	778 Deerwood Lane, Lancaster, 29720	803 285 2376				
County Director	Tim Jackson	149802	5393 Copeland Road, Heath Springs, 29058	803 273 3768				
County Director	David Kirk	181467	3627 Rocky River Road, Heath Springs, 29058	803 286 0286	803 286 4191		803 804.0822	turkeysareus@hotmail com

Page Two -2009-2010 Lancaster County Officers and Directors

E-Mail Address								
Mobile Phone #	803 325 5629	803 289 7887						
Fax Phone #			803 283 2754					
Office Phone #	803 286 8805	803.286 5296	803 286 8420					
Home Phone #	803 286 5777	803 285 0531	803 285 4028	803 285 0040	803 286 4993	803 283 2493	803 283 9851	803 548 4163
Address, City & Zip	407 E Doc Garris Road, Lancaster, 29720	1846 Baskins Hill Road, Heath Springs, 29058	2208 Beacon Road, Lancaster, 29720	1431 Old Pardue Road, Lancaster, 29720	3389 Plyler Mill Road, Lancaster, 29720	1074 Edgar Drive, Lancaster, 29720	1592 John Everall Road, Lancaster, 29720	8835 Stacie Howie Road, Fort Mill, 29715
Member #	293778	27637	763033	428195	210987	211019	366463	49767
Name	Reece Kirk	James R Knight	George Mungo	Wayne Pardue	Fred Plyler, Sr	Sam Robinson	W A Westmoreland	Randy E Wilson
Office	County Director	County Director	County Director	County Director	County Director	County Director	County Director	County Director