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Form **990-EZ**Department of the Treasury
Internal Revenue Service**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****A For the 2009 calendar year, or tax year beginning , and ending**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization		D Employer identification number
		CHESTERFIELD COUNTY FARM BUREAU		57-0351236
		Number and street (or P.O. box, if mail is not delivered to street address) Room/suite PO BOX 808		E Telephone number 803-796-6700
City or town, state or country, and ZIP + 4 CHESTERFIELD SC 29709-0808		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

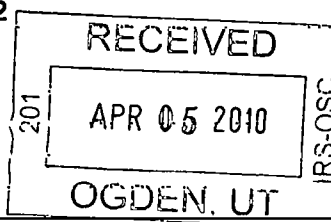
H Check ▶ ☒ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

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.

L 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. ▶ \$ **195,931**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

Revenue	1 Contributions, gifts, grants, and similar amounts received	1	86,387
	2 Program service revenue including government fees and contracts	2	1,329
	3 Membership dues and assessments	3	
	4 Investment income	4	6,292
	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	101,923	
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	195,931	
Expenses	10 Grants and similar amounts paid (attach schedule) Stmt 2	10	36,913
	11 Benefits paid to or for members	11	
	12 Salaries, other compensation, and employee benefits	12	103,685
	13 Professional fees and other payments to independent contractors	13	
	14 Occupancy, rent, utilities, and maintenance	14	18,694
	15 Printing, publications, postage, and shipping	15	
	16 Other expenses (describe ▶ See Statement 3)	16	20,239
17 Total expenses. Add lines 10 through 16	17	179,531	
Net Assets	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	16,400
	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	208,768
	20 Other changes in net assets or fund balances (attach explanation)	20	
	21 Net assets or fund balances at end of year. Combine lines 18 through 20	21	225,168

**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	114,530	130,930
23 Land and buildings	16,323	16,323
24 Other assets (describe ▶ See Statement 4)	77,915	77,915
25 Total assets	208,768	225,168
26 Total liabilities (describe ▶)	0	0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	208,768	225,168

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

Form **990-EZ** (2009)
 ENVELOPE
 POSTMARK DATE
 MAR 31 2010
 SCANNED APR 26 2010

Expenses

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

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.

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 5

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

31a

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

32

[illegible]

	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)? 42b		X
If "Yes," enter the name of the foreign country 42b		
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: 42c		
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here 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

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	46	
47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	47	
48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	
49a Did the organization make any transfers to an exempt non-charitable related organization?	49a	
b If "Yes," was the related organization a section 527 organization?	49b	

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."

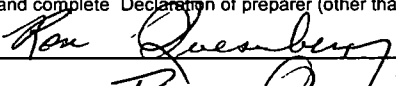
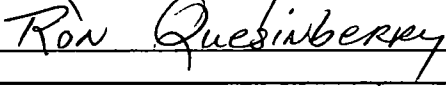

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances

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 <u>3/30/10</u>	
Paid Preparer's Use Only	 Type or print name and title		Date <u>Tax Officer</u>	
	Preparer's signature 		Date <u>03/30/10</u>	Check if self-employed <input type="checkbox"/>
	Firm's name (or yours if self-employed), address, and ZIP + 4 <u>SC Farm Bureau Federation</u> <u>724 Knox Abbott Dr</u> <u>Cayce, SC 29033</u>		Preparer's Identifying Number (See instr.) EIN <u> </u> Phone no <u>803-936-4676</u>	
	May the IRS discuss this return with the preparer shown above? See instructions ▶ <input type="checkbox"/> Yes <input type="checkbox"/> No			

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

<u>Description</u>	<u>Amount</u>
SERVICE FEES FROM AFFILIATE	\$ 101,923
Total	\$ 101,923

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	35,658
Total		<u>35,658</u>

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

<u>Description</u>	<u>Amount</u>
Expenses	\$
Office	8,470
Conferences/Meetings	11,799
Interest	-30
Total	<u>\$ 20,239</u>

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

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
BUILDINGS/IMPROVEMENTS	\$ 60,262	\$ 60,262
FURNITURE/EQUIPMENT	17,653	17,653
	<u>77,915</u>	<u>77,915</u>

Federal Statements

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

Description

PROVIDED FUNDS FOR AGRICULTURAL EDUCATION

2009-2010 CHESTERFIELD COUNTY FARM BUREAU OFFICERS AND DIRECTORS

PO Box 808 • Chesterfield, SC 29709 • 843 623.2119

Pageland Office • 118 N Pearle Street • Pageland, SC 29728 • 843.672 5935

Office	Name	Member #	Address, City & Zip	Home Phone #	Office Phone #	Fax #	Mobile Phone #	E-Mail Address
President	Jerry Mills	412056	210 N Page Street, Chesterfield, 29709	843 623 9017	843 634 7781		843 672 4343	
Vice President	Bo Norris	525470	PO Box 310, Society Hill, 29593	843.378 1654	843 378 4961		843 378 4961	n farms@bellsouth net
Secretary-Treasurer	H Williard Page	254228	PO Box 148, Chesterfield, 29709	843 623 7799				
State Director	Chap Hurst	251280	203 Hurst Lane, Chesterfield, 29709	843 623.7407				
State Director	Wade H Miles	66659	6338 Angelus Road, Ruby, 29741	843 634 6168				
Alternate State Director	Randy Threatt	272688	14006 Highway 265, Jefferson, 29718	843 658 3198	843 658 3002		843 680 0043	
Legislative Committee Chair	Marvin Snead	462957	982 Austin Road, Pageland, 29728-9255	843 672 6493		843 672 6493	704.254 0736	marmar2@shlc net
Young Farmers & Ranchers Chair	Bo Norris	525470	PO Box 310, Society Hill, 29593	843 378 1654	843 378 4961		843 378 4961	n farms@bellsouth net
Women's Committee Chair	Rachel Miles-Jackson	262273	20 Gibb Jordan Road, Mt Croghan, 29727	843 634 7756	843 623 2249	843 623 6384	843 672 4634	rtmiles@shlc net
Information/Public Relations Chair								
County Director	Malcolm Byrd	623961	4895 Tony Mill Road, Patrick, 29584	843 498 6586				
County Director	Chap Hurst	51280	203 Hurst Lane, Chesterfield, 29709	843 623 7407				
County Director	Billy Jenkins	412024	253 Billy Jenkins Lane, Jefferson, 29718	843 658 3792				
County Director	Richard Lee, Jr	731327	223 Wilson Brock Lane, Cheraw, 29520	843 623 6168				

Page Two -2009-2010 Chesterfield County Officers and Directors

Office	Name	Member #	Address, City & Zip	Home Phone #	Office Phone #	Fax Phone #	Mobile Phone #	E-Mail Address
County Director	Wade H Miles	66659	6338 Angelus Road, Ruby, 29741	843 634 6168				
County Director	Rachel Miles-Jackson	262273	20 Gibb Jordan Road, Mt Croghan, 29727	843 634 7756	843 623 2249	843 623 6384	843 672 4634	rtmiles@shtc.net
County Director	Jerry Mills	410256	210 N Page Street, Chesterfield, 29709	843 623 9017	843 634 7781		843 672 4343	
County Director	Michael Nicholson	395047	238 Johns Road, Pageland, 29728	843 672 3092				
County Director	Bo Norris	525470	PO Box 310, Society Hill, 29593	843 378 1654	843 378 4961		843 378 4961	nlarms@bellsouth.net
County Director	H Williard Page	254228	PO Box 148, Chesterfield, 29709	843 623 7799				
County Director	Roger D Smith	276975	3304 Johnson Road, Jefferson, 29718	843 658 3607				
County Director	Marvin Sneed	462957	982 Austin Road, Pageland, 29728-9255	843 672 6493		843 672 6493	704 254 0736	marmar2@shtc.net
County Director	Bobby Sullivan	104236	794 RW Jordan Road, Pageland, 29728	843 672 7900				
County Director	Donald Teal	412227	298 Cat Pond Road, Patrick, 29584	843 498 6841				
County Director	Terry Teal	754859	73 Sandy Teal Road, Patrick, 29584	843 498 6999				
County Director	Randy Threatt	272688	14006 Highway 265, Jefferson, 29718	843 658 3198	843 658 3002		843 680 0043	