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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
- ☐ 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
LAURENS COUNTY FARM BUREAU

Number and street (or P O box, if mail is not delivered to street address) Room/suite
PO BOX 408

City or town, state or country, and ZIP + 4
LAURENS SC 29360-0408

D Employer identification number
57-0358213

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

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 ▶ $ 120,451

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	57,777
	2	Program service revenue including government fees and contracts	2	868
	3	Membership dues and assessments	3	
	4	Investment income	4	4,036
	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 ▶ ☐		
	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	57,770
	9	**Total revenue.** Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 ▶	9	120,451
Expenses	10	Grants and similar amounts paid (attach schedule) Stmt 2	10	21,034
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	50,727
	13	Professional fees and other payments to independent contractors	13	
	14	Occupancy, rent, utilities, and maintenance	14	16,881
	15	Printing, publications, postage, and shipping	15	
	16	Other expenses (describe ▶ See Statement 3)	16	30,195
	17	**Total expenses.** Add lines 10 through 16 ▶	17	118,837
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	1,614
	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	329,950
	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	331,564

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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	106,102	22	105,030
23 Land and buildings	6,336	23	6,336
24 Other assets (describe ▶ See Statement 4)	217,512	24	220,337
25 **Total assets**	329,950	25	331,703
26 **Total liabilities** (describe ▶ See Statement 5)	0	26	139
27 **Net assets or fund balances** (line 27 of column (B) **must** agree with line 21)	329,950	27	331,564

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

Form **990-EZ** (2009)

DAA

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 6

(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.)

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-.)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
SEE ATTACHED LIST	PRESIDENT	0	0	0
SEE ATTACHED LIST	OTHER OFFICERS	0	0	0
SEE ATTACHED LIST	DIRECTORS	0	0	0

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	33		X
34	Were any changes made to the organizing or governing documents? If "Yes," attached a conformed copy of the changes	34		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?	35a	X	
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	35b	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	36		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?	37b		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?	38a		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 ▶ _____ , section 4912 ▶ _____ , section 4955 ▶ _____			
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 ▶ _____			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization ▶ _____			
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

			Yes	No
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)? 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.**	42b		X
c	At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country ▶ _____	42c		X
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			

			Yes	No
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 Ron Quesinberry Date 3/30/10

Type or print name and title Ron Quesinberry TAX Officer

Paid Preparer's Use Only

Preparer's signature	Date	Check if self-employed ▶	Preparer's Identifying Number (See instr)
	03/30/10	☐	

Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ SC Farm Bureau Federation, 724 Knox Abbott Dr, Cayce, SC 29033

EIN ▶

Phone no ▶ 803-936-4676

May the IRS discuss this return with the preparer shown above? See instructions ▶ ☐ Yes ☐ No

Federal Statements

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

Description	Amount
SERVICE FEES FROM AFFILIATE	$ 57,770
Total	$ 57,770

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	18,396
Total		18,396

Federal Statements

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

Description	Amount
Expenses	$
Office	7,047
Conferences/Meetings	22,769
Interest	379
Total	$ 30,195

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

Description	Beginning of Year	End of Year
BUILDINGS	$ 186,801	$ 189,626
FURNITURE/EQUIPMENT	34,315	34,315
Less Accumulated Depreciation	3,604	3,604
	217,512	220,337

Statement 5 - Form 990-EZ, Part II, Line 26 - Total Liabilities

Description	Beginning of Year	End of Year
PAYROLL TAX LIABLILTIES	$	$ 139
		139

Statement 6 - Form 990-EZ, Part III, Line 31 - Statement of Program Service Accomplishments

Description
PROVIDED FUNDS FOR AGRICULTURAL EDUCATION

2009-2010 LAURENS COUNTY FARM BUREAU OFFICERS AND DIRECTORS

PO Box 408 • Laurens, SC 29360 • 864.984.0413

Office	Name	Member #	Address, City & Zip	Home Phone #	Office Phone #	Fax #	Mobile Phone #	E-Mail Address
President	Doug Stewart	267071	1 Depot Road, Gray Court, 29645	864 862 2620	864 876 3297	864 876 9582	864 981 4007	dougstewart33@yahoo com
Vice President	Thomas Dailey	1535	114 Charlottes Road, Clinton, 29325	864 833.3372	864 833 0604		864 923.1585	tdailey50@bellsouth net
Secretary-Treasurer	Lewis Power	269085	PO Box 252, Laurens, 29360	864 682 3402	864 682 3652	864 682 3356		jhpowerco@prtcnet com
State Young Farmer Chair	Brandon Hurley	530602	3792 Highway 92, Gray Court, 29645		864 876 3136			
Piedmont District Director-at-Large	Doug Stewart	267071	1 Depot Road, Gray Court, 29645	864 862 2620	864 876 3297	864 876 9582	864 876 6038	dougstewart33@yahoo com
State Director	Thomas Dailey	1535	114 Charlottes Road, Clinton, 29325	864 833 3372	864 833 0604		864 923 1585	tdailey50@bellsouth net
State Director	James Martin	269334	460 Martin Lake Road, Gray Court, 29645	864 876 3269			864 872 8333	
Alternate State Director	Jim Ollis	472384	2450 Graden Road, Ware Shoals, 29692	864 861 4124	864 269 3600		864 444 4846	nancypeppers@hotmail com
Legislative Committee Chair	Billy Abercrombie	395501	91 Rabun Church Road, Gray Court, 29645	864 575 2588			864 871 1152	
Young Farmers & Ranchers Chair	Brandon Hurley	530602	3795 Highway 92, Gray Court, 29645		864 876 3136			
Women's Committee Chair	Lindy Wood	627454	17361 Highway 25, Ware Shoals, 29692	864 861 2300	864 984 0413	864 984 0487		lindywood@prtcnet com
Information/Public Relations Chair	Marilyn Easter	698441	901 E Glen Road, Laurens, 29360	864 682 2835	864 682 2003	864 682 2835		eastglen@aol com
Information/Public Relations Chair	Kim Lambert	643990	3174 S Harper Street Extention, Laurens, 29360	864 682 5677				kclambert01@yahoo com
County Director	Billy Abercrombie	39550	91 Rabun Church Road, Gray Court, 29645	864 575 2588				
County Director	William Armstrong	627422	PO Box 135, Gray Court, 29645	868 876 3405				

Page Two –2009-2010 Laurens County Officers and Directors

Office	Name	Member #	Address, City & Zip	Home Phone #	Office Phone #	Fax Phone #	Mobile Phone #	E-Mail Address
County Director	George P Copeland	486141	3951 Highway 56 S, Clinton, 29325				864.923.0015	
County Director	Posey Copeland, Jr	251847	2228 Bush River Road, Kinards, 29355	864 697 6319				sbc_twc_2@bellsouth net
County Director	Neil Crisp	439325	96 Plumfield Farm Road, Cross Hill, 29332	864 994 3823				plumfield960@hotmail com
County Director	Thomas Dailey	1535	114 Charlottes Road, Clinton, 29325	864 833 3372	864 833 0604		864 923 1585	tdailey50@bellsouth net
County Director	Davis Gibbs	813795	1172 Gibbs Road, Laurens, 29360	864 682 2401				
County Director	Ralph Holtzclaw	230308	7982 Ekom Beach Road, Ware Shoals, 29692	864 861 2531				
County Director	Maxcy P Hunter	273776	1970 Ora Road, Gray Court, 29645	864.682 3640	864 984 3411	864 984 2928	864 684 7862	
County Director	Dr John Irwin	839025	813 Irwin Road, Laurens, 29360	864 682 3467	864.984 2514 x117	864.984 2402		jwirwin@clemson edu
County Director	James Martin	269334	460 Martin Lake Road, Gray Court, 29645	864 876 3269				
County Director	Curtis Moore	293009	12036 Highway 76 W, Gray Court, 29645	864 575 2388			864 871 2106	rcfarm@backroads wck
County Director	Marvin Nelson	245291	1761 Bellview Church Road, Laurens, 29360	864 682 2393				
County Director	Jim Ollis	472384	2450 Graden Road, Ware Shoals, 29692	864 861 4124	864.269 3600		864 444 4846	nancypeppers@hotmail com
County Director	Hazel Owings	644018	PO Box 36, Gray Court, 29645	864 876 3515				
County Director	Madison Pitts	116388	198 Burts Road, Clinton, 29325	864 833 3276			864 981 1276	
County Director	Lewis Power	269085	PO Box 252, Laurens, 29360	864 682 3402	864 682 3652	864 682 3356		jhpowerco@prtcnet com
County Director	Calvin Robertson	627420	1441 Ghost Creek Road, Laurens, 29360	864 682 2701	864 984 2280		864 871 2021	ddrclan@prtcnet com

Page Three –2009-2010 Laurens County Officers and Directors

Office	Name	Member #	Address, City & Zip	Home Phone #	Office Phone #	Fax Phone #	Mobile Phone #	E-Mail Address
County Director	Ray Stoddard	26485	357 Dogwood Road, Gray Court, 29645	864 876 3226				
County Director	Ray Whiteford	5158	PO Box 764, Clinton, 29325	864 697 5342				
County Director	Paul Wilkie	487201	2146 Harris Bridge Road, Woodruff, 29388	864 876 2649				
County Director	William Young	242127	2476 Bush River Road, Kinards, 29355	864 697 6293				