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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)

OMB No 1545-1150

2009**Open to Public
Inspection**

- ▶ 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.

Department of the Treasury
Internal Revenue Service

For the 2009 calendar year, or tax year beginning , and ending

Check if applicable

Address change

Name change

Initial return

Termination

Amended return

Application pending

Please
use IRS
label or
print or
type.
See
Specific
Instruc-
tions.

C Name of organization

DORCHESTER COUNTY FARM BUREAU

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

PO BOX 596

Room/suite

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

SAINT GEORGE**SC 29477-0596**

D Employer identification number

57-0473829

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) ▶

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. ▶ \$ **139,669**

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	52,206
2	Program service revenue including government fees and contracts	2	
3	Membership dues and assessments	3	
4	Investment income	4	
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	87,463
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	139,669
10	Grants and similar amounts paid (attach schedule) Stmnt 2	10	15,729
11	Benefits paid to or for members	11	
12	Salaries, other compensation, and employee benefits	12	59,990
13	Professional fees and other payments to independent contractors	13	
14	Occupancy, rent, utilities, and maintenance	14	31,510
15	Printing, publications, postage, and shipping	15	
16	Other expenses (describe ▶ See Statement 3)	16	18,098
17	Total expenses. Add lines 10 through 16	17	125,327
18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	14,342
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	278,027
20	Other changes in net assets or fund balances (attach explanation) See Statement 4	20	-504
21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	291,865

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	213,016	227,186
23 Land and buildings	2,500	2,500
24 Other assets (describe ▶ See Statement 5)	63,742	63,756
25 Total assets	279,258	293,442
26 Total liabilities (describe ▶ See Statement 6)	1,231	1,577
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	278,027	291,865

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

Form **990-EZ** (2009)

NE 11

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)? 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 43		
and enter the amount of tax-exempt interest received or accrued during the tax year		
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		
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."

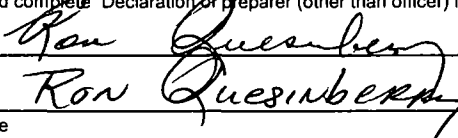

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances

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 <u>3/30/10</u> Tax Officer	
Paid Preparer's Use Only	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		EIN	Phone
	SC Farm Bureau Federation 724 Knox Abbott Dr Cayce, SC 29033			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**

<u>Description</u>	<u>Amount</u>
SERVICE FEES FROM AFFILIATE	\$ 87,445
MINOR MISCELLANEOUS	18
Total	<u>\$ 87,463</u>

18 DORCHESTER COUNTY FARM BUREAU
57-0473829
FYE: 12/31/2009

Federal Statements

3/30/2010 9:33 AM

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	15,454
Total		<u>15,454</u>

57-0473829

Federal Statements

FYE: 12/31/2009

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

Description	Amount
Expenses	\$
Office	9,030
Conferences/Meetings	9,060
Interest	8
Total	\$ 18,098

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

Description	Amount
AUDIT ADJUSTMENTS	\$ -504
Total	\$ -504

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

Description	Beginning of Year	End of Year
BUILDINGS/FURNITURE/EQUIPMENT	\$ 64,872	\$ 64,886
Less Accumulated Depreciation	1,130	1,130
	63,742	63,756

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

Description	Beginning of Year	End of Year
PAYROLL TAX LIABILITIES	\$ 1,231	\$ 1,577
	1,231	1,577

Federal Statements

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

Description

PROVIDED FUNDS FOR AGRICULTURAL EDUCATION

2009-2010 DORCHESTER COUNTY FARM BUREAU OFFICERS AND DIRECTORS

PO Box 596 • St. George, SC 29477 • 843.563.4556

Summerville Office • 705 Trolley Road, Suite E • Summerville, SC 29485 • 843.873.7391

Office	Name	Member #	Address, City & Zip	Home Phone #	Office Phone #	Fax #	Mobile Phone #	E-Mail Address
President	Jamey Fender	476160	341 St Mark Bowman Road, Reevesville, 29471	843 563 9105			843 636 4043	jfender@mindspring.com
Vice President	Richard Rhode	757662	1079 Zion Road, Dorchester, 29437	843 563 2514	843 563 1411	843 563 2514	843.563 1411	
Secretary-Treasurer	James Fender	417303	PO Box 191, Reevesville, 29471	843 563 2662			843 636 4044	
State Director	Wendell Wimberly	270018	2189 Cattle Creek Road, Rowesville, 29133	843 829 2485	843 563 7505		843 563 1440	
Alternate State Director	Pinckney Murray	649425	3028 Wire Road, St George, 29477	843 563 3627			843 560 1827	
Legislative Committee Chair	Charles Traxler	231294	402 Old Spell Road, St George, 29477	843 563 5423			843 200.4471	traxcw@aol.com
Young Farmers & Ranchers Chair	Trent Pandarvis	614806	955 W Main Street, Harleyville, 29448	843 563 3684				
Women's Committee Chair	Ruth Anne O'Cain	162983	179 Clubhouse Circle, St George, 29477	843 563.4954				ruthanneocain@bellsouth.net
Information/Public Relations Chair	Greg Gruber	649805	269 Rigby Road, Bowman, 29018	803 829 2624	843 636 1213		843 636 1213	
County Director	Perry Chinnners	140309	PO Box 157, Reevesville, 29471	843 563 8096			843.636 4060	chinnnerschickens@earthlink.net
County Director	Roger Clark	257561	977 Wire Road, Dorchester, 29437	843 563 3994				
County Director	Arthur Dukes	205429	1164 Highway 15 S, St George, 29477	843 563 3821			843 563 1307	
County Director	James Infinger	251990	141 Deep Woods Road, St George, 29477	843 563 4917			843 200 3338	
County Director	Albert J Judy	135058	PO Box 162, Reevesville, 29471	843 563 2531	843 563 2531		843 636 4065	judsur@earthlink.net

Page Two -2009-2010 Dorchester County Officers and Directors

Office	Name	Member #	Address, City & Zip	Home Phone #	Office Phone #	Fax Phone #	Mobile Phone #	E-Mail Address
County Director	John Pendarvis	614806	955 W Main Street, Harleyville, 29448	843 563 3684				
County Director	Trent Pendarvis	614806	955 W Main Street, Harleyville, 29448	843 563 3684				
County Director	Doug Reeves	262767	415 Independent School Road, Reevesville, 29471	843 563 9487		843 636 9282	843 636 1470	dareeves@edisto coop
County Director	Greg Reeves	92375	141 Country Club Boulevard, St George, 29477	843 563 5595	843 563 3639		843 560 1660	
County Director	Jeff Reeves	11228	4016 McCords Ferry, Ellore, 29047	803 826 6369			843 560 1500	
County Director	Larry Rushton	104003	311 Cypress Grove Lane, St George, 29477	843 563 7458				
County Director	William Salisbury	609491	716 N Maple Street, Summerville, 29483	843 871 8219			843 514 7470	
County Director	Jeff Sweatman	713371	154 Sweatman Farm Road, St George, 29477	843 563 4637	843 563 4133		843 241 2317	
County Director	Jody Weathers	125372	935 Maple Branch Road, Reevesville, 29471	843 563 7271	843 563 3766	843 563 7109	843 563 1320	jweathers@infoave.net
County Director	Joe Wimberly	205616	PO Box 25, Reevesville, 29471	843 563 4210				