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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**Department of the Treasury  
Internal Revenue Service

<b>A</b> For the 2009 calendar year, or tax year beginning , and ending							
<b>B</b> Check if applicable: Address change Name change Initial return Termination Amended return Application pending	<table border="1"> <tr> <td><b>C</b> Name of organization <b>WILLIAMSBURG COUNTY FARM BUREAU</b></td> <td><b>D</b> Employer identification number <b>57-6024199</b></td> </tr> <tr> <td>Number and street (or P O box, if mail is not delivered to street address) <b>PO BOX 758</b></td> <td><b>E</b> Telephone number <b>803-796-6700</b></td> </tr> <tr> <td>City or town, state or country, and ZIP + 4 <b>KINGSTREE SC 29556-0758</b></td> <td><b>F</b> Group Exemption Number <b>2393</b></td> </tr> </table>	<b>C</b> Name of organization <b>WILLIAMSBURG COUNTY FARM BUREAU</b>	<b>D</b> Employer identification number <b>57-6024199</b>	Number and street (or P O box, if mail is not delivered to street address) <b>PO BOX 758</b>	<b>E</b> Telephone number <b>803-796-6700</b>	City or town, state or country, and ZIP + 4 <b>KINGSTREE SC 29556-0758</b>	<b>F</b> Group Exemption Number <b>2393</b>
<b>C</b> Name of organization <b>WILLIAMSBURG COUNTY FARM BUREAU</b>	<b>D</b> Employer identification number <b>57-6024199</b>						
Number and street (or P O box, if mail is not delivered to street address) <b>PO BOX 758</b>	<b>E</b> Telephone number <b>803-796-6700</b>						
City or town, state or country, and ZIP + 4 <b>KINGSTREE SC 29556-0758</b>	<b>F</b> Group Exemption Number <b>2393</b>						

• 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 ▶ \$ **114,351****Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)**

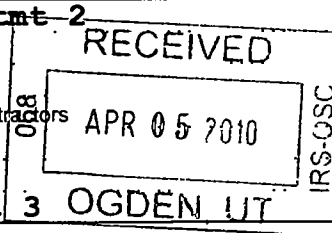
<b>1</b> Contributions, gifts, grants, and similar amounts received	<b>1</b>	<b>49,579</b>
<b>2</b> Program service revenue including government fees and contracts	<b>2</b>	<b>10</b>
<b>3</b> Membership dues and assessments	<b>3</b>	
<b>4</b> Investment income	<b>4</b>	<b>4,561</b>
<b>5a</b> Gross amount from sale of assets other than inventory	<b>5a</b>	
<b>b</b> Less: cost or other basis and sales expenses	<b>5b</b>	
<b>c</b> Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	<b>5c</b>	
<b>6</b> Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here <input type="checkbox"/>		
<b>a</b> Gross revenue (not including \$ _____ of contributions reported on line 1)	<b>6a</b>	
<b>b</b> Less: direct expenses other than fundraising expenses	<b>6b</b>	
<b>c</b> Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	<b>6c</b>	
<b>7a</b> Gross sales of inventory, less returns and allowances	<b>7a</b>	
<b>b</b> Less: cost of goods sold	<b>7b</b>	
<b>c</b> Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	<b>7c</b>	
<b>8</b> Other revenue (describe ▶ <b>See Statement 1</b> )	<b>8</b>	<b>60,201</b>
<b>9</b> Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	<b>9</b>	<b>114,351</b>
<b>10</b> Grants and similar amounts paid (attach schedule) <b>Stnt-2</b>	<b>10</b>	<b>19,603</b>
<b>11</b> Benefits paid to or for members	<b>11</b>	
<b>12</b> Salaries, other compensation, and employee benefits	<b>12</b>	<b>64,496</b>
<b>13</b> Professional fees and other payments to independent contractors	<b>13</b>	
<b>14</b> Occupancy, rent, utilities, and maintenance	<b>14</b>	<b>10,855</b>
<b>15</b> Printing, publications, postage, and shipping	<b>15</b>	
<b>16</b> Other expenses (describe ▶ <b>See Statement 3</b> )	<b>16</b>	<b>18,123</b>
<b>17</b> Total expenses. Add lines 10 through 16	<b>17</b>	<b>113,077</b>
<b>18</b> Excess or (deficit) for the year (Subtract line 17 from line 9)	<b>18</b>	<b>1,274</b>
<b>19</b> 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)	<b>19</b>	<b>210,977</b>
<b>20</b> Other changes in net assets or fund balances (attach explanation) <b>See Statement 4</b>	<b>20</b>	<b>3,861</b>
<b>21</b> Net assets or fund balances at end of year. Combine lines 18 through 20	<b>21</b>	<b>216,112</b>

**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
<b>22</b> Cash, savings, and investments	<b>80,699</b>	<b>86,002</b>
<b>23</b> Land and buildings		
<b>24</b> Other assets (describe ▶ <b>See Statement 5</b> )	<b>130,278</b>	<b>130,278</b>
<b>25</b> Total assets	<b>210,977</b>	<b>216,280</b>
<b>26</b> Total liabilities (describe ▶ <b>See Statement 6</b> )	<b>0</b>	<b>168</b>
<b>27</b> Net assets or fund balances (line 27 of column (B) must agree with line 21)	<b>210,977</b>	<b>216,112</b>

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

Form **990-EZ** (2009)

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

(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.)

DAA

	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		<b>X</b>
34 Were any changes made to the organizing or governing documents? If "Yes," attached a conformed copy of the changes		<b>X</b>
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but <b>not</b> 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?	<b>X</b>	
b If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	<b>X</b>	
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		<b>X</b>
37a Enter amount of political expenditures, direct or indirect, as described in the instr <b>37a</b>		
b Did the organization file <b>Form 1120-POL</b> for this year?		<b>X</b>
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?		<b>X</b>
b If "Yes," complete Schedule L, Part II and enter the total amount involved <b>38b</b>		
39 Section 501(c)(7) organizations Enter:		
a Initiation fees and capital contributions included on line 9 <b>39a</b>		
b Gross receipts, included on line 9, for public use of club facilities <b>39b</b>		
40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 <b>40a</b> , section 4912 <b>40a</b> , section 4955 <b>40a</b>		
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 <b>40b</b>		
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 <b>40c</b>		
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization <b>40d</b>		
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 <b>40e</b>		<b>X</b>
41 List the states with which a copy of this return is filed <b>SC</b>		
42a The organization's books are in care of <b>SC FARM BUREAU</b> Telephone no <b>803-796-6700</b>		
Located at <b>BOX 754 COLUMBIA SC</b> ZIP + 4 <b>29202-0754</b>		
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)? <b>42b</b>		<b>X</b>
If "Yes," enter the name of the foreign country: <b>42c</b>		
See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts</b> .		
c At any time during the calendar year, did the organization maintain an office outside of the U.S.? <b>42c</b>		<b>X</b>
If "Yes," enter the name of the foreign country <b>43</b>		
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of <b>Form 1041</b> —Check here and enter the amount of tax-exempt interest received or accrued during the tax year <b>43</b>		
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ <b>44</b>		<b>X</b>
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 <b>45</b>		<b>X</b>

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

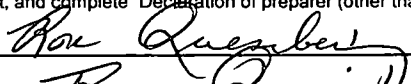
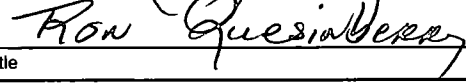
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances

**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 ▶

<b>Sign Here</b>	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>	
<b>Paid Preparer's Use Only</b>	 Type or print name and title		Date <u>03/30/10</u>	
	Preparer's signature		Check if self-employed <input type="checkbox"/>	Preparer's Identifying Number (See instr.)
	Firm's name (or yours if self-employed), address, and ZIP + 4 <b>SC Farm Bureau Federation</b> <b>724 Knox Abbott Dr</b> <b>Cayce, SC 29033</b>		EIN <span style="float: right;">▶</span> Phone no <b>803-936-4676</b>	

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	\$ 60,201
Total	<u>\$ 60,201</u>

45 WILLIAMSBURG COUNTY FARM BUREAU

57-6024199

FYE: 12/31/2009

## Federal Statements

3/30/2010 8:27 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	15,666
Total		<u>15,666</u>

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

Description	Amount
Expenses	\$
Office	8,246
Conferences/Meetings	9,867
Interest	10
Total	\$ 18,123

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

Description	Amount
AUDIT ADJUSTMENTS	\$ 3,861
Total	\$ 3,861

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

Description	Beginning of Year	End of Year
BUILDINGS	\$ 104,022	\$ 104,022
EQUIPMENT	26,256	26,256
	130,278	130,278

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

Description	Beginning of Year	End of Year
PAYROLL TAX LIABILITIES	\$	\$ 168
		168



**Federal Statements**

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

Description

PROVIDED FUNDS FOR AGRICULTURAL EDUCATION

# 2009-2010 WILLIAMSBURG COUNTY FARM BUREAU OFFICERS AND DIRECTORS

PO Box 758 • Kingstree, SC 29556 • 843.354.9616

Office	Name	Member #	Address, City & Zip	Home Phone #	Office Phone #	Fax #	Mobile Phone #	E-Mail Address
President	Brian McClam	457302	53 Poor Farm Road, Kingstree, 29556	843 382 4749			843 382 7611	millwoodguncclub@yahoo.com
Vice President	Carroll Haddock	740810	192 Cedar Swamp Road, Kingstree, 29556	843 382 3901	843 426 6440	843 382 3904	843 372 3939	
Secretary-Treasurer	Tommy Stuckey, Jr.	652223	841 McLunkin Road, Nesmith, 29590	843 382 3139			843 372 8888	tsjr-01@yahoo.com
State Director	Thomas E Britton	282793	801 Radio Road, Hemingway, 29554	843 558 3893	843 558.2530	843 558 7678	843 933.0347	tcinc@netscape.com
State Director	Charles O'Quinn	252404	PO Box 247, Kingstree, 29556	843 382 9000	843 382 9310	843 382 9310	843 244 4937	
Alternate State Director	Henry Elliott, Jr	740637	645 Pepper Hill Road, Andrews, 29510	843 221 5343	843 833 4193		843 527 9682	hmellott@fci-net
Legislative Committee Chair	Michael Grier	735731	761 Baptist Road, Hemingway, 29554	843 558.9546	843 933 0183	843 558 9546	843 687 9100	megrier@yahoo.com
Young Farmers & Ranchers Chair	Brian McClam	457302	53 Poor Farm Road, Kingstree, 29556	843 382 4749			843 382 7611	millwoodguncclub@yahoo.com
Women's Committee Chair								
Information/Public Relations Chair								
County Director	Jerry Bingham	444070	1101 Broad Swamp Road, Kingstree, 29556	803 478 3337	843 382 2121	843 382 2121	843 687 4419	binghamj@fci-net
County Director	John Boswell	62664	2259 Bloomville Road, Manning, 29102	803 473 4007	843 355 6106		803 429 6771	boswell@clemson.edu
County Director	Leroy Cantey	17381	84 Cantey Lane, Salters, 29590	843 387 5237				
County Director	Will Carsten	103288	PO Box 123, Cades, 29518	843 389 2627			843 373 2425	
County Director	Robert Duke, Jr	735691	40 Lynchburg Highway, Kingstree, 29556	843 382 3688			843 372 8009	rduke@fci-net

Page Two -2009-2010 Williamsburg County Officers and Directors

Office	Name	Member #	Address, City & Zip	Home Phone #	Office Phone #	Fax Phone #	Mobile Phone #	E-Mail Address
County Director	Henry Elliott, Sr	444134	8393 Thurgood Marshall Highway, Andrews, 29510	843 221 5432	843 833 4193		843 833 4193	
County Director	Marvin Fulton	740635	985 McCutchen Road, Cades, 29518	843 382 9724			843 687 6846	
County Director	William Gordon	166101	6262 Santee Road, Lane, 29564	843 355 5674			843 687 0161	
County Director	Claude McClary	218755	5492 US Highway 521, Salters, 29590	843 387 5631				
County Director	John Scott McGill, IV	173060	699 Sims Reach Road, Kingstree, 29556				843 372 2003	mcgillfarm_construction@hotmail.com
County Director	Irwin McIntosh	65286	588 McIntosh Road, Kingstree, 29556	843 372 2988	843 355 6665			
County Director	Mark Scott	604825	PO Box 105, Lane, 29564	843 382 5257			843 372 1275	
County Director	Shane Stuckey	812833	1201 Woodland Drive, Kingstree, 29556	843 355 4003	800 365 3242		843 687 0782	stuckeyfarm2000@yahoo.com
County Director	Brice Williamson	57918	109 N 2nd Avenue, Lake City, 29560	843 394 0298	843 382 8177	843 394 0265	843 319 5043	jbrwilliamson@scrr.com