

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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)

Sponsoning 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

	partment of the mal Revenue			assets less than \$1,250 00 The organization may have to use a common state of the com	00 at the end of the year may use this for		romonto		Ins	pection
			vear. c	or tax year beginning	, 2009, and			L	, 20	
_	Check if appli		, , .	C Name of organization	, 1000, 4.11		-	D Employer		
	Address chan		Please	LOUISIANA AGRICULTURAL	CONSULTANTS ASS				49068	
			use IRS label or	Number and street (or P O box if mail is n		Room/		E Telephone		
	Name change		print or	Transcrand street (or 1 'O' box it mains it	or delivered to sheet address)	KOOIII	suite	L relephone	Hullibei	
	Initial return		type See	1100 HWY 107		i				
	Terminated		Specific Instruc-	City or town, state or country, and ZIP + 4				5 05		
	Amended retu	"" '	tions				İ	F Group Exe		
_	Application pe			Morrow, LA 71356			لب	Number		
(A)	Section	n 501(c)(3)		ations and 4947(a)(1) nonexempt				ccounting Metho	d XC	ash Accrual
<u>)</u>			a con	npleted Schedule A (Form 990 or	390-EZ).			ther (specify)		
		_						heck ▶ X ıf t	-	
2	Website:						re	equired to attach	Schedule	B (Form 990,
				ly one) - X 501(c) (3) ◀ (in		527		90-EZ, or 990-PI		
	Check >			on is not a section 509(a)(3) suppo						5,000 A
<u> </u>	Form 990-E	Z or Form	990 ret	urn is not required, but if the organ	zation chooses to file a return, l	be sure	e to file	a complete retur	n	
<u> </u>	Add lines 5	b, 6b, and	7b, to lii	ne 9 to determine gross receipts, if	\$500,000 or more, file Form 99	0 inste	ad of Fe	orm 990-EZ	\$	83,277
₽P	art I	Revenue	e, Exp	enses, and Changes in N	et Assets or Fund Bala	nces	(See	the instructions	for Part I)
ಲಾ	1 C	ontributions	, gifts,	grants, and similar amounts receive	ed • • • • • • • • • • • • • • • • • • •			1		29,196
2	2 P	rogram serv	rev	enue including government fees ar	nd contracts - · · · · ·			2		
3	3 M	lembership	dues a	nd assessments • • • • • • •	• • • • • • • • • • • • • • • • • • • •					53,653
	4 In	vestment in	come					4		428
	5a G	ross amour	nt from s	sale of assets other than inventory	5a			<u> </u>		
	b Le	ess cost or	other b	asis and sales expenses	5b				İ	
R	٠.			ale of assets other than inventory (••••	• • • •	50		
<u>è</u>	1	The second livery was a second livery with the second livery was a second livery was a second livery was a second livery was a second livery was a second livery was a second livery was a second livery was a second livery was a second livery with the second livery was a second livery was a second livery with the second livery was a second livery was a second livery was a second livery was a second livery was a second livery was a second livery was a second livery was a second livery was a secon		es (complete applicable parts of Schedule G	·					
¥-		os reveni	e (not i	ncluding \$	of contributions	GIIÇÜK IIÇ	510			
بيب	re	ported on li	nan l		- 	1				
l u	10 11 bill	as Alfact e		s other than fundraising expenses	6b				ł	
1	Mr Sir	et income o	TEL	from special events and activities	(Subtract line 6b from line 6a)			60	.	
١١	1			tory, less returns and allowances	·	1			<u> </u>	
6				sold • • • • • • • • • • • • •		-				
<u> </u>	۔۔۔ تے دسا									
				from sales of inventory (Subtract I	ne /b nom me /a)	• • •	• • • •	70		
		ther revenu	•) 8		
				lines 1, 2, 3, 4, 5c, 6c, 7c, and 8						83,277
				mounts paid (attach schedule) .		• • •		10		
E		•		r members • • • • • • • • • • • • • • • • • • •		• • •	• • • •	11		20,878
х р	1			ensation, and employee benefits						
e n				d other payments to independent of						
\$				ities, and maintenance • • • • •						
e	1			s, postage, and shipping · · · ·				—		175
•	16 0	ther expens	ses (des	d lines 10 through 16 · · · · ·) 16		52,771
_	17 To	otal expens	es. Ad	d lines 10 through 16 · · · · ·	• • • • • • • • • • • • • • • • • • • •	• • •	• • • •	• • • ▶ 17		73,824
A	l I			r the year (Subtract line 17 from lin				18		9,453
NS	19 N			alances at beginning of year (from						
e s	er			ported on prior year's return) 🕠 🕠						98,834
' t	20 0	ther change	es in ne	t assets or fund balances (attach e	xplanation) • • • • • • • •		• • • •	20)	
_	21 N	et assets or	fund b	alances at end of year Combine lin	nes 18 through 20 _ · · · ·	• • •		▶ 21		108,287
P	art II	Balance	Shee	ts. If Total assets on line 25, co	umn (B) are \$1,250,000 or mor	e, file	Form 99	0 instead of For	m 990-EZ	
				(See the instructions for Part II)				Beginning of year) End of year
22	Cash, sa	avings, and	ınvestn	nents · · · · · · · · · · · · ·				98,834		108,287
23	Land an	d buildings							23	
24									24	
25	Total as	sets · ·		• • • • • • • • • • • • • • • • • • • •		- .		98,834	25	108,287
26		bilities (des)		<u> </u>	26	•
27		•		es (line 27 of column (B) must agre	e with line 21)	<u>-</u> ′.		98,834		108.287

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

EEA

Part III Statement of Program Service Acco	omplishments (See the	instructions for Part III	<u>) </u>	/Dan.	Expenses
What is the organization's primary exempt purpose? KEEP I					uired for section c)(3) and 501(c)(4)
Describe what was achieved in carrying out the organization's				organ	izations and section
manner, describe the services provided, the number of persons	s benefited, or other relevar	nt information for			(a)(1) trusts, optiona
each program title				for ot	hers)
28 THE ASSN. HAD VERY GOOD ATTENDANCE AT T					
AND NEW AND OLD MATTERS WERE DISCUSSED.	CURRENT INFORMAT	ION			
WAS GIVEN TO ALL WHO ATTENDED.					_
······································	ount includes foreign grants	s, check here · · ·	· · · · >	28a	
29					
<u> </u>	ount includes foreign grants	s, check here · · · ·	•••• <u>•</u>	29a	
30					
	ř.				
	ount includes foreign grants	s, check here · · · ·	· · · · > '	30a	
31 Other program services (attach schedule) • • • • • • • •		• • • • • • • • • •	• • • • •		
	ount includes foreign grants	s, check here · · · ·	• • • • •	31a	
32 Total program service expenses (add lines 28a through 3		• • • • • • • • • • • • • • • • • • • •		32	
Part IV List of Officers, Directors, Trustees, and Key E	mployees. List each one ev	en if not compensated	(See the instru	ctions f	or Part IV)
(a) Name and address	(b) Title and average	(c) Compensation	(d) Contributions		(e) Expense account and
(a) Name and address	hours per week devoted to position	(If not paid, enter -0)	deferred compens		other allowances
FRED COLLINS	TREASURER				
P O BOX 4212 Pineville LA, 71361	5	C		d	C
RICHARD COSTELLO	PRESIDENT				
3579 HWY 577 Pioneer LA, 71266	4	c		d	C
ROGER CARTER	SECRETARY				
178 CARTER LOOP Clayton LA, 71326	5	c		d	C
		1			
					· · · · · · · · · · · · · · · · · · ·
		,			
· · · · · · · · · · · · · · · · · · ·					
· · · · · · · · · · · · · · · · · · ·					
			i		
	 				-
	<u> </u>				_
			-		
					
		ļ			
				Ì	
	 				

LOUISIANA AGRICULTURAL CONSULTANTS ASSN

Form 990-EZ (2009)

72-0949068

Page 2

Dut the organization engage in any activity not previously reported to the IRS? If "Yes," attach a defailed description of each activity Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but with the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but with the organization had income in Form 990-T and bit the organization have unrelated business gross income of \$1,000 or more or was it subject to section 9033(e) notice, reporting, and proyr lax requirements? If "Yes," has it filed a tax return on Form 990-T for this year? 35b If "Yes," and it filed a tax return on Form 990-T for this year? 36c In Did the organization the Form 1120-POL for this year? 37c In Did the organization the Form 1120-POL for this year? 38d In Did the organization the Form 1120-POL for this year? 38d In Did the organization the Form 1120-POL for this year? 38d If Yes, and the did the properties of schedule N In International Policy or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? 38d If Yes, and the file of the properties of the organization of the properties Schedule In Part II and enter the botal amount involved 38d If Yes In If Yes, and International Policy organizations Enter aniount of tax imposed on the organization during the year under section 501(c)(3) organizations Enter aniount of tax imposed on the organization during the year under section 501(c)(3) organizations. Enter aniount of tax imposed on the organization with a discussified person in a prior year, and that the replace in any section 4952 ≥ years and the properties of the years organization organization with a discussified person organization or segmentation in the section 501(c)(3) and 501(c)(4) organizations. Enter aniount of tax imposed on the orga	Pa	rt V Other Information (Note the statement requirements in the instructions for Part V)			
A Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes 34 X X		NOT CARD INC.		Yes	No
Second Solic(S) and solic Form 1129-POL for this year? State the content of policy to the c	33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed			
34 Were any changes made to the organization of governing documents? If "Yes," attach a conformed copy of the changes 35 If the organization had income from business activities, such as those reported on lines 2, 5a, and 7a (among others), but not reported on Form 990-T, attach a statement explaning why the organization did not report the income on Form 990-T and official continuation of the organization of the organization and proxy tax requirements? 36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable part of Schedule N 37 a Enter amount of political expenditures, direct or indirect, as described in the instructions 38 a Did the organization inferent 1120-PDL for the year? 39 a Did the organization borrow from, or make any loans to, any officer, director, frustee, 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? 38 a Did the organization borrow from, or make any loans to, any officer, director, frustee, 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? 38 a Did the organization borrow from, or make any loans to, any officer, director, frustee, 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? 39 Section 501(c)(7) organizations. Either amount involved 39 Section 501(c)(3) and 501 (c)(4) organization included on line 9 30 Section 501(c)(3) and 501 (c)(4) organizations. Either amount of tax imposed on the organization during the year or si at ware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction of tax imposed on any of the organization and prior year and soft of the year. 40 Section 501(c)(3) and 501(c)(4) organizations. Did the organization in an excess benefit transaction with year or		· · · · · · · · · · · · · · · · · · ·	33		x
the changes 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 attach a statement explaining why the organization did not report the income on Form 990-T attach a statement explaining why the organization did not report the income on Form 990-T at 10 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 lax requirements? If 'Yes,' The sit filled a tax return on Form 990-T for this year? If 'Yes,' The sit filled a tax return on Form 990-T for this year? If 'Yes,' The sit filled a tax return on Form 990-T for this year? If 'Yes,' Complete Sphicable parts of Schedule N If 'Yes,' Complete Sphicable on Inte 9 If 'Yes,' Complete Sphicable Sphicable N If 'Yes,' Complete Sphicable Sphicable Sphicable N If 'Yes,' Complete Sphicable Sphicable Sphicable N If 'Yes,' Complete Sphicable Sphicable N If 'Yes,' Complete Sphicable Sphi	34	·			<u> </u>
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 990-17 at all ach a statement explaning why the organization dut not report the income on Form 990-17 at 35 but the organization have unrelated business gross income of \$1,000 or impre or was it subject to section 933(e) notice, reporting, and proxy tax requirements? 5 bit 16**yes*, has it filed a tax return on Form 990-17 for this year? 5 bit 16**yes*, has it filed a tax return on Form 990-17 for this year? 5 clump the year? 16**yes*, complete applicable parts of Schedule N 5 clump the year of 16**, complete applicable parts of Schedule N 5 clump the year of 16**, complete special parts of Schedule N 5 clump the year of 16**, complete special parts of Schedule N 5 clump the year of 16**, complete special parts of Schedule N 5 clump the year of 16**, complete special parts of Schedule N 5 clump the year of 16**, complete Schedule L, Part II and enter the total amount involved 5 clump the year of 16**, complete Schedule L, Part II and enter the total amount involved 5 clump the year of 18**, complete Schedule L, Part II and enter the total amount involved 5 clump the year of 18**, and 18**,			34		x
not reported on Form 990-T, attach a statement explaning 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?	35	·			
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 If "Yes," has it filed a tax return on Form 990-T for this year? 50 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Scheduch N 73 a Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 50 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 peniod covered by this return? 51 b If "Yes," complete Schedule I., Part II and enter the total amount involved 52 b If "Yes," complete Schedule I., Part II and enter the total amount involved 53 s Section \$01(c)(7) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ school \$10(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ school \$50(c)(3) and \$501(c)(4) organizations Enter amount of tax imposed on any of the organization and \$501(c)(4) organizations Enter amount of tax imposed on any of the organization and \$601(c)(4) organizations Enter amount of tax imposed on any of the organization with a disqualified person organization managers or office. School \$601(c)(4) organizations Enter amount of tax imposed on organization amanagers or office. School \$601(c)(4) organizations Enter amount of tax imposed on organization and \$601(c)(4) organizations Enter amount of tax imposed on organization and \$601(c)(4) organizations Enter amount of tax imposed on organization and \$601(c)(4) organizations Enter amount of tax imposed on organization and \$601(c)(4) organizations Enter amount of tax imposed on organization and \$601(c)(4) organizations Enter amount of tax imposed on organization and \$601(c)(4) organization and \$	••	·			
8 603(e) notice, reporting, and proxy tax requirements? \$ 16 "Yes," has it field a fax return on Form 990-T for this year? \$ 17 0 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 \$ 27 37 a	a				
b If "Yes," has it fried a tax return on Form 990-T for this year? 30 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 31 a Enter amount of political expenditures, direct or indirect, as described in the instructions 32 a Enter amount of political expenditures, direct or indirect, as described in the instructions 33 b Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such bas made in a prory year and still outstanding at the end of the period covered by this return? 33 b Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such bas made in a prory year and still outstanding at the end of the period covered by this return? 34 b If "Yes," complete Schedule L, Part II and enter the total amount involved 35 Section 501(c)(7) organizations Enter 36 Did the organization of the organization in the period of the organization organization of the organization of the organization organization of the organization organization of the organization of the organization or	ű		352		v
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 37 a Enter amount of political expenditures, direct or indirect, as described in the instructions 38 b) Did the organization file Form 1120-POL for this year? 39 a Did the organization file Form 1120-POL for this year? 31 a Did the organization file Form 1120-POL for this year? 38 a Did the organization file Form 1120-POL for this year? 39 a Did the organization file Form 1120-POL for this year? 30 a Did the organization file Form 1120-POL for this year? 30 a Did the organization file Form 1120-POL for this year? 31 a Did the organization file Form 1120-POL for this year? 32 b) If "Yes," complete Schedule L, Part II and enter the total amount involved 33 Section 501(c)(7) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶		(-) white for the first of			
during the year? If "Yes," complete applicable parts of Schedule N 27 a Enter amount of political expenditures, direct or indirect, as described in the instructions 28 a Did the organization file Form 1120-POL for this year? 38 a Did the organization borrow from, or make any loans to, any officer, director, frustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the pend covered by this return? 29 b If "Yes," complete Schedule L, Part II and enter the total amount involved 39 Section 501(c)(7) organizations Enter and intended on line 9 (50 pt) the case of club facilities 39 Section 501(c)(7) organizations included on line 9 (50 pt) the use of club facilities 40 a Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4955 ≥ 50 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 should be person in a prior year, and that the transaction has not been reported on any of the organization's prior 50 Forms 990 or 990-E27 (***Tes**, complete Schedule L, Part I. 50 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 4956 4 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization and prior		·	330		
37 a Enter amount of political expenditures, direct or indirect, as described in the instructions b Did the organization file Form 1120-POL for this year? 38 b Did the organization file Form 1120-POL for this year? 39 a Did the organization brown from, or make any joans 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? 38 b J If Yes, "complete Schedule L. part II and enter the total amount involved 39 Section 501(c)(7) organizations Enter a initiation fees and capital contributions included on line 9 b Gross recepts, included on line 9, for public use of club facilities 39 Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 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-E27 if "res," complete Schedule L. Part I 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 of the organizations at any time during the lax year, was the organization a party to a prohibited tax shelter transaction? If "res," complete Form 8886-T Located at 1 3208 PINE RIDGE Pinevilla, IA 2 The organization's books are in care of 1 PRED COLLINS Telephone in 2 1P+4 7 13360 2 1P+4 7 13360 3 18-613-0875 2 1P+4 8 10 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	30		20		
b Did the organization file Form 1120-POL for this year? 38 a 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? 38 b 39 b		and the year of the product of the p	36		_X_
38 a Did the organization borrow from, or make any loans to, any officer, director, frustee, 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? 38 b If Yes, "center the name of the foreign country ≥ Section 951(c)(7) organizations Enter and the first total amount involved 39 Section 501(c)(7) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ section 4911 ▶ section 4912 ▶ section 4955 ▶ 5 Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ section 6911 ▶ section 69					
a lary such loans made in a prior year and still outstanding at the end of the period covered by this return? b f"Yes," complete Schedule L, Part II and enter the total amount involved 38 Section 501(c)(7) organizations Enter a Initiation fees and capital contributions included on line 9 38a			3/D		<u> </u>
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 39b	38 a				
39 Section \$01(c)(7) organizations Enter a Initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities 39a b Gross receipts, included on line 9, for public use of club facilities 39b b Gross receipts, included on line 9, for public use of club facilities 39b b Gross receipts, included on line 9, for public use of club facilities 39b b Section \$01(c)(3) organizations Enter amount of tax imposed on the organization during the year under section \$01(c)(3) and \$01(c)(4) organizations Did the organization engage in any section 4955 ▶ b Section \$01(c)(3) and \$01(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* 1*"Yes," complete Schedule L. Part 1 40b X 40b X 40b X 40c C Section \$01(c)(3) and \$01(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 \$01(c)(3) and \$01(c)(4) organizations Enter amount of tax imposed on organizations Al any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8868-T Located at ▶ 3208 PINE RIDGE Paineville, LiA 2P+4 21 The organization's books are in care of ▶ FRED COLLINS Located at ▶ 3208 PINE RIDGE Paineville, LiA 2P+4 A 1 A any meduring the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 4 A any time during the calendar year, did the organization maintain an office outside of the U S? Yes No Yes No 440 141 Did the organization maintain a		any outsit found that prior your and our outsitality at the original period outsited by the relative	38a		<u> X</u>
a Initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities 39a b Gross receipts, included on line 9, for public use of club facilities 40 a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 Section 4912 Section 4955 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-E27 if "Yes," complete Schedule L, Part I 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 4956 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 transactory If "Yes," complete Form 8886-T Located 19 300 8 PINE RIDGE Planevilla, LiA 21 List the states with which a copy of this return is filed LiA 22 a The organization's books are in care of P FRED COLLINS Located 19 300 8 PINE RIDGE Planevilla, LiA 21 P 14 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7					
b Gross receipts, included on line 9, for public use of club facilities 39b 40 a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ section 4912 ▶ section 4915 ► section 4915 ► section 4911 ▶ section 4915 ► section 4911 ▶ section 4912 ▶ section 4955 ► b 5 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 I 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	39	• • • • • • • • • • • • • • • • • • •			
## Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ section 4912 ▶ section 4955 section 4955 be Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4956 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-E72 if "Yes," complete Schedule L, Part I 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					,
section 4911					
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	40 a			!	l
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		section 4911 , section 4912 , section 4955			
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 X 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 Located at b 3208 PINE RIDGE Pineville, LA 21P + 4 22 a The organization's books are in care of b FRED COLLINS Located at b 3208 PINE RIDGE Pineville, LA 21P + 4 21F + 4 21F + 5 218 No 22P + 4 22 a The organization 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? 21F + 4 23 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 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 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 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	b	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit			,
Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I 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 List the states with which a copy of this return is filed 1 Lest the states with which a copy of this return is filed 2 In the organization's books are in care of \$\infty\$ FRED COLLINS 1 Located at \$\infty\$ 3208 PINE RIDGE Pineville, LA 2 In the organization's books are in care of \$\infty\$ FRED COLLINS 2 In the organization's books are in care of \$\infty\$ FRED COLLINS 1 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 2 In the organization 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? 42 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 44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ 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		transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified			
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					
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 La 40e X 41 List the states with which a copy of this return is filed La 42 a The organization's books are in care of FRED COLLINS Telephone no Located at 3208 PINE RIDGE Pineville, La 5 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. 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 As 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 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ 44 X 5 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 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 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		Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		X
4955, and 4958 . d Section 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 1 List the states with which a copy of this return is filed ▶ LA 1 List the states with which a copy of this return is filed ▶ LA 1 Located at ▶ 3208 PINE RIDGE PINEVILLO, LA ZIP+4 ▶ 71360 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. 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 ▶ 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 140 Ves No 141 Ves No 142 Ves No 143 Ves No 144 Ves No 145 Sia any related organization acontrolled 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 Sia any related organization acontrolled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ.	C	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on			
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. 40					
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 List the states with which a copy of this return is filed LA 41 List the states with which a copy of this return is filed LA 42 a The organization's books are in care of FRED COLLINS Located at 3208 PINE RIDGE Pineville, LA Diphanola account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial accounts)? 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. C At any time during the calendar year, did the organization maintain an office outside of the U S? 42 X 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. C At any time during the calendar year, did the organization maintain an office outside of the U S? 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 44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ 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 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 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		4955, and 4958 · · · · · · · · · · · · · · · · · · ·			,
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 List the states with which a copy of this return is filed 1	d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c			·
transaction? If "Yes," complete Form 8886-T List the states with which a copy of this return is filed		reimbursed by the organization • • • • • • • • • • • • • • • • • • •			
41 List the states with which a copy of this return is filed ▶ LA 42 a The organization's books are in care of ▶ FRED_COLLINS Telephone no Located at ▶ 3208 PINE_RIDGE_Pineville, LA 5 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)? 6 if "Yes," enter the name of the foreign country ▶ 6 See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 7 c At any time during the calendar year, did the organization maintain an office outside of the U S? 42	е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter			
41 List the states with which a copy of this return is filed ▶ LA 42 a The organization's books are in care of ▶ FRED_COLLINS Telephone no Located at ▶ 3208 PINE_RIDGE_Pineville, LA 5 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)? 6 if "Yes," enter the name of the foreign country ▶ 6 See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 7 c At any time during the calendar year, did the organization maintain an office outside of the U S? 42		transaction? If "Yes," complete Form 8886-T	40e		Х
Telephone no Located at 3208 PINE RIDGE Pineville, IA ZIP + 4 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 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. 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 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 Yes No Yes No Yes No In lieu of Form 1041-Check here and enter the amount of tax-exempt interest received or accrued during the tax year Yes No In lieu of Form 990-EZ	41				
Located at ▶ 3208 PINE RIDGE Pineville, LA 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 in a foreign country ♦ Yes No 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. C At any time during the calendar year, did the organization maintain an office outside of the US? 42c X If "Yes," enter the name of the foreign country ▶ 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 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ 44 S 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 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	42 a		13-0	875	
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. 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 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 Yes No Yes No Yes No If "Yes," Form 990-EZ Is any related organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ 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 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 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If			50		
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. 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 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 Yes No Yes No Yes No If "Yes," Form 990-EZ Is any related organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ 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 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 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If	ь	At any time during the calendar year, did the organization have an interest in or a signature or other authority			
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. 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 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 Yes No 143 Yes No Yes No 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				Yes	No
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. 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 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 Yes No 14 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ 15 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			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? If "Yes," enter the name of the foreign country 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 Yes No 144 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ 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					
and Financial Accounts. c At any time during the calendar year, did the organization maintain an office outside of the US?					ļ
c At any time during the calendar year, did the organization maintain an office outside of the US?					,
If "Yes," enter the name of the foreign country 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	r		42c	1	y
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	·			L	
and enter the amount of tax-exempt interest received or accrued during the tax year	43		<u></u> .		
Yes No 144 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ · · · · · · · · · · · · · · · · · · ·	73		•••		
Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ		and enter the amount of tax-exempt interest received or accrued during the tax year			
Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ				Ver	- N-
Form 990-EZ · · · · · · · · · · · · · · · · · · ·	4.	Ord the excession we start and the decided of the decided of the excession		TOS	NO
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	44				
"Yes," Form 990 must be completed instead of Form 990-EZ			44	ļ	<u>X</u>
	45				
	_			0.55	

Part \	Section 501(c)(3) orga 501(c)(3) organizations and se	nizations and	section 4947(a)	(1) nonexempt of	charitable trusts only Jestions 46-49b	y. All section	n	
	and complete the tables for lin		,	•				
46 D	id the organization engage in direct		al campaign activities o	n behalf of or in oppo	osition to		Yes	No
	andidates for public office? If "Yes,"					46		
	id the organization engage in lobbyi	•		ile C. Part II		47		
	the organization a school as descri					- 48	 	X
	id the organization make any transf					· 49a		
						49b	-	
	"Yes," was the related organization				diseases societies and les		<u> </u>	L
	omplete this table for the organization					У		
e	mployees) who each received more	than \$100,000 of				-1		
	(a) Name and address of each employee pa	aid more	(b) Title and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans &		Expense ount and	
	than \$100,000		devoted to position		deferred compensation	other a	llowance	s
NONE								
f To	otal number of other employees par	d over \$100,000	•			L		
	complete this table for the organizati			lant contractors who	and recoved more than			
	_	_			each received more man			
\$	100,000 of compensation from the o	organization if th	ere is none, enter "Nor	ie "				
	(a) Name and address of each independ	dent contractor paid me	ore than \$100,000	(d) T	Type of service	(c) Compe	nsation	
NONE	M							
*						-		
T	otal number of other independent co	ontractors oach re	2001/100 0V0r \$100 000			 -		
• ,,	otal number of other independent of	ontractors each re	scerning over \$100,000	··· •				
					statements, and to the best of my to tion of which preparer has any kno			
	and belief, 193 the, correct, and	Collins Declaration	on or preparer (other than other	ser) is based on all illionia				
Sign	1 / MO	pun-			17-14-	-10		
Here	Signature of officer	Ji			Date			
	FRED COLLINS, TRI	EASURER						
	Type or print name and title	-						
	Preparer's	0 1 1		Date	Check if Preparer's	s Identifying No	(See in:	st)
Paid	signature Con	act of		07-13-2010	self- employed > X		•-	•
Prepare		KENNETH J RA	ACHAL, CPA	1- /	1			
Use On	Firm's name (or yours	269 EAST MAI			EIN P			
Dag Ou	addrose and ZID + 4				210	-240-07F4	2	
14		MARKSVILLE,			Phone no 318-	-240-8758		
iviay the	e IRS discuss this return with the pre	eparer shown abo	ve7 See instructions	• • • • • • • • •		Yes		
				EEA		Form 9	90-EZ ((2009)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. See separate instructions. OMB No 1545-0047

2009

Open to Public Inspection

Employer identification number Name of the organization LOUISIANA AGRICULTURAL CONSULTANTS ASSN 72-0949068 Reason for Public Charity Status (All organizations must complete this part) See instructions Part I The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) X An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h b Type II Type I c Type III-Functionally integrated d | Type III-Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the q following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) Yes Nο and (iii) below, the governing body of the supported organization? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s) (ii) EIN Name of supported (iii) Type of organization (iv) Is the organization (v) Did you notify (vi) Is the (vii) Amount of organization (described on lines 1-9 in col (i) listed in your the organization in organization in col hoggus above or IRC section governing document? col (1) of your (i) organized in the US? (see instructions)) Yes Yes Yes

LOUISIANA AGRICULTURAL CONSULTANTS ASSN

Pai	(Complete only if you checked the	panizations D box on line 5, 7, o	escribed in Se or 8 of Part I)	ections 170(b)(1)(A)(iv) and	170(b)(1)(A)(vi)
Sec	tion A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge • • • • • •						
4	Total. Add lines 1 through 3 · · · · ·						
5	The portion of total contributions by each	***************************************					
	person (other than a governmental unit or				1		
	publicly supported organization) included				,		
	on line 1 that exceeds 2% of the amount	*					
	shown on line 11, column (f)						
6	Public support. Subtract line 5 from In 4			~	y		
Sec	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4 · · · · · · · · ·						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on ••••••••						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10 •	35 644 75	100				
12	Gross receipts from related activities, etc. (s					- 12	
13	First five years. If the Form 990 is for the o organization, check this box and stop here						
<u>Sec</u>	tion C. Computation of Public Su						
14	Public support percentage for 2009 (line 6,	column (f) divided	l by line 11, columi	n (f)) • • • • • •		- 14	%
15	Public support percentage from 2008 Sche						%
16a	33 1/3% support test - 2009. If the organization	tion did not check	the box on line 13	, and line 14 is 33	1/3% or more, che	eck this box	
	and stop here. The organization qualifies a	s a publicly suppo	rted organization	• • • • • • •	• • • • • • • •	• • • • • • • •	• • • • • •
b	33 1/3% support test - 2008. If the organization	tion did not check	a box on line 13 o	r 16a, and line 15	ıs 33 1/3% or mor	e, check this	
	box and stop here. The organization qualifi	•	• •	-			• • • • • •
17a	10%-facts-and-circumstances test - 2009.	f the organization	did not check a bo	x on line 13, 16a,	or 16b, and line 1	4 is 10% or	
	more, and if the organization meets the "fac						_
	organization meets the "facts-and-circumsta	ances" test. The o	rganızatıon qualıfie	s as a publicly su	pported organizati	on	• • • • • • • •
b	10%-facts-and-circumstances test - 2008.	f the organization	did not check a bo	ox on line 13, 16a,	16b, or 17a, and I	ine 15 is 10% or	
	more, and if the organization meets the "fac	ts-and-circumstai	nces" test, check th	is box and stop h	ere. Explain in Pai	rt IV how the	
	organization meets the "facts-and-circumsta			· · · · · · · · · · · · · · · · · · ·	•		· · · · · · ·
18	Private foundation. If the organization did r	not check a box or	n line 13, 16a, 16b,	17a, or 17b, ched	k this box and see	instructions •	• • • • • • • • • • • • • • • • • • •

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") •••••• 200,932 50,062 68,021 82,849 Gross receipts from admissions, merchandise sold or services performed, or faclities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or bus under sec 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf · · · · · · · The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 50,062 68,021 82,849 200,932 Amounts included on lines 1, 2, and 3 received from disqualified persons . . b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year . . . c Add lines 7a and 7b · · · · · · · · R Public support (Subtract line 7c from 200,932 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 68,021 50,062 82,849 200,932 Amounts from line 6 Gross income from interest, dividends, 10a payments received on securities loans, rents, royalties and income from similar 490 750 428 1,668 b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b · · · · 490 750 428 1,668 Net income from unrelated business activities not included in line 10b. whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support. (Add lines 9, 10c, 11, 202,600 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 15 % 16 Public support percentage from 2008 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) % 17 Investment income percentage from 2008 Schedule A, Part III, line 17 - · · · · · · · 18 % 33 1/3% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 20 Private Foundation: If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶

	Federal Supporting Statements	2009	
Name(s) as shown on return		FEIN	

Form 990EZ, Part I, Line 16 Other Expenses Schedule 2

Description	Amount
LACA ANNUAL CONVENTION	32,536
CROP SYMPOSIUM	2,476
FALL RETREAT	3,003
CREDIT CARD FEES	806
LATMC	4,680
MEETING SUPPLIES	665
SPEAKER REIMBURSEMENTS	2,905
DONATIONS TO OTHERS	400
DUES	1,000
LEGAL AND PROFESSIONAL	300
SPONSORSHIPS PAID TO OTHERS	3,000
ADVERTISING	1,000
Total	52,771
10041	<u> </u>

Overflow Statemen Name(s) as shown on return		Page I
· •	F	2009 Page 1
OUISIANA AGRICULTURAL CONSULTANTS ASSN		72-0949068
escription		Amount
SPONSORSHIPS		\$ 25,916 3,280
VORKSHOPS	Total:	\$ 29,196
escription		Amount
MEMBERSHIP DUES		\$ 30,523
MEMBERSHIP REGISTRATIONS MISC REGISTRATIONS		8,225 14,905
MISC REGISTRATIONS	Total:	\$ 53,653
Description		Amount
SUPPORT SERVICES		\$ 14,816 6,062
SCHOLARSHIPS PAID TO MEMBERS	Total:	\$ 20,878
Description POSTAGE		* Amount 175
POSTAGE	Total:	\$ 175
	100421	

8868 Form

(Rev April 2009)

Application for Extension of Time to File an **Exempt Organization Return**

OMB No 1545-1709 Department of the Treasury File a separate application for each return. Internal Revenue Service If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box ■ If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Automatic 3-Month Extension of Time. Only submit original (no copies needed) A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only . . All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868 For more details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Charities & Nonprofits Type or Name of Exempt Organization Employer identification number print LOUISIANA AGRICULTURAL CONSULTANTS ASSN 72-0949068 File by the Number, street, and room or suite no. If a P.O. box, see instructions due date for 1100 HWY 107 filing your return See City, town or post office, state, and ZIP code. For a foreign address, see instructions instructions Morrow, LA 71356 Check type of return to be filed (file a separate application for each return) !Form 990 Form 990-T (corporation) Form 4720 Form 990-BL Form 990-T (sec 401(a) or 408(a) trust) Form 5227 X Form 990-EZ Form 990-T (trust other than above) Form 6069 Form 990-PF Form 1041-A Form 8870 The books are in the care of FRED COLLINS 3208 PINE RIDGE Pineville, LA 71360 Telephone No ▶ 318-613-0875 FAX No ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) for the whole group, check this box • • If it is for part of the group, check this box • and attach a list with the names and EINs of all members the extension will cover I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time 08-16 , 20 10, to file the exempt organization return for the organization named above. The extension is for the organization's return for X:calendar year 20 09 or , 20 tax year beginning , 20 , and ending , Initia! return . Fina! return If this tax year is for less than 12 months, check reason Change in accounting period 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions 3a b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit c Balance Due. Subtract line 3b from line 3a include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

System) See instructions

30