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## 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

Form 990-EZ

Department of the Treasury  
Internal Revenue Service

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

A For the 2009 calendar year, or tax year beginning JUL 1, 2009 and ending JUN 30, 2010

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type See Specific Instructions	<b>C</b> Name of organization		<b>D</b> Employer identification number
		VERMONT FARM BUREAU, INC.		03-0185056
		Number and street (or P.O. box, if mail is not delivered to street address)		<b>E</b> Telephone number
		117 WEST MAIN STREET		802-434-5646
City or town, state or country, and ZIP + 4		<b>F</b> Group Exemption Number		
RICHMOND, VT 05477				

• 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: WWW.VTFB.ORG

**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 \$ 382,668.

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

<b>Revenue</b>	1	Contributions, gifts, grants, and similar amounts received	1	1,000.
	2	Program service revenue including government fees and contracts	2	92,360.
	3	Membership dues and assessments	3	179,813.
	4	Investment income	4	1,186.
	5a	Gross amount from sale of assets other than inventory	5a	
	5b	Less: cost or other basis and sales expenses	5b	
	5c	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"/>		
<b>Expenses</b>	6a	Gross revenue (not including \$ _____ of contributions reported on line 1)	6a	
	6b	Less: direct expenses other than fundraising expenses	6b	
	6c	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	
	7b	Less: cost of goods sold	7b	
	7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
	8	Other revenue (describe) _____	8	108,309.
	9	<b>Total revenue</b> Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	382,668.
	10	Grants and similar amounts paid (attach schedule)	10	1,563.
	<b>Net Assets</b>	11	Benefits paid to or for members	11
12		Salaries, other compensation, and employee benefits	12	261,738.
13		Professional fees and other payments to independent contractors	13	3,683.
14		Occupancy, rent, utilities, and maintenance	14	9,980.
15		Printing, publications, postage, and shipping	15	44,167.
16		Other expenses (describe) _____	16	130,008.
17		<b>Total expenses</b> Add lines 10 through 16	17	455,474.
18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	<72,806.>	
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	56,899.	
20	Other changes in net assets or fund balances (attach explanation)	20	<48.>	
21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	<15,955.>	

**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	14,344.	8,250.
23 Land and buildings		
24 Other assets (describe) SEE STATEMENT 2 )	358,357.	291,021.
25 Total assets	372,701.	299,271.
26 Total liabilities (describe) SEE STATEMENT 3 )	315,802.	315,226.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	56,899.	<15,955.>

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02-08-10

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

Form 990-EZ (2009)



**Part V Other Information** (Note the statement requirements in the instructions for Part V)

	Yes	No
<b>33</b> 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>
<b>34</b> Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes		<b>X</b>
<b>35</b> 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.		
<b>a</b> 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>b</b> If "Yes," has it filed a tax return on Form 990-T for this year?	<b>X</b>	
<b>36</b> Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Sch. N		<b>X</b>
<b>37a</b> Enter amount of political expenditures, direct or indirect, as described in the instructions. <span style="float: right;">▶ <b>37a</b> 0.</span>		
<b>b</b> Did the organization file Form 1120-POL for this year?		<b>X</b>
<b>38a</b> 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>b</b> If "Yes," complete Schedule L, Part II and enter the total amount involved <span style="float: right;"><b>38b</b> N/A</span>		
<b>39</b> Section 501(c)(7) organizations. Enter:		
<b>a</b> Initiation fees and capital contributions included on line 9 <span style="float: right;"><b>39a</b> N/A</span>		
<b>b</b> Gross receipts, included on line 9, for public use of club facilities <span style="float: right;"><b>39b</b> N/A</span>		
<b>40a</b> Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:		
section 4911 <span style="float: right;">▶ N/A</span> ; section 4912 <span style="float: right;">▶ N/A</span> ; section 4955 <span style="float: right;">▶ N/A</span>		
<b>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 <span style="float: right;"><b>40b</b> N/A</span>		
<b>c</b> 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 <span style="float: right;">▶ N/A</span>		
<b>d</b> Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization <span style="float: right;">▶ N/A</span>		
<b>e</b> 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 <span style="float: right;"><b>40e</b> X</span>		
<b>41</b> List the states with which a copy of this return is filed. <span style="float: right;">▶ NONE</span>		
<b>42a</b> The organization's books are in care of <span style="float: right;">▶ CHRISTOPHER O'KEEFE</span> Telephone no. <span style="float: right;">▶ (802) 434-5646</span>		
Located at <span style="float: right;">▶ 117 WEST MAIN STREET, RICHMOND, VT</span> ZIP + 4 <span style="float: right;">▶ 05477</span>		
<b>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)?		
If "Yes," enter the name of the foreign country: <span style="float: right;">▶</span>		
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
<b>c</b> 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: <span style="float: right;">▶</span>		
<b>43</b> Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here <span style="float: right;">▶ <input type="checkbox"/></span>		
and enter the amount of tax-exempt interest received or accrued during the tax year <span style="float: right;">▶ <b>43</b> N/A</span>		
<b>44</b> Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ <span style="float: right;"><b>44</b> X</span>		
<b>45</b> 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 <span style="float: right;"><b>45</b> X</span>		

Form 990-EZ (2009)

**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

- 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 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?
- 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."

	Yes	No
<b>46</b>		
<b>47</b>		
<b>48</b>		
<b>49a</b>		
<b>49b</b>		

(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
N/A				

- 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
N/A		

- d** Total number of other independent contractors each receiving over \$100,000

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.

**Sign Here** Signature of officer: *Matthew S. Barker* Date: *5.16.11*

**ADMINISTRATOR**  
Type or print name and title

**Paid Preparer's Use Only** Preparer's signature: *[Signature]* Date: *05/12/11* Check if self-employed: ☐ Preparer's identifying number (See instr.): *[Blank]*

Firm's name (or yours if self-employed): **MCSOLEY MCCOY & CO.** EIN: *[Blank]*  
address, and ZIP + 4: **118 TILLEY DRIVE, STE. 202** Phone no.: *[Blank]*  
**SOUTH BURLINGTON, VT 05403** (802) 658-1808

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

Form 990-EZ (2009)

**SCHEDULE C**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Political Campaign and Lobbying Activities**  
**For Organizations Exempt From Income Tax Under section 501(c) and section 527**

OMB No 1545-0047

**2009**

**Open to Public  
Inspection**

▶ **Complete if the organization is described below.**  
▶ **Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.**

**If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then**

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

**If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then**

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

**If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then**

- Section 501(c)(4), (5), or (6) organizations Complete Part III.

Name of organization

**VERMONT FARM BUREAU, INC.**

Employer identification number

**03-0185056**

**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV
- 2 Political expenditures ▶ \$ \_\_\_\_\_
- 3 Volunteer hours \_\_\_\_\_

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ \_\_\_\_\_
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ \_\_\_\_\_
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
- 4a Was a correction made? ☐ Yes ☐ No
- b If "Yes," describe in Part IV

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ \_\_\_\_\_
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ \_\_\_\_\_
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ \$ \_\_\_\_\_
- 4 Did the filing organization file Form 1120-POL for this year? ☐ Yes ☐ No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2009

LHA

**Part II-A** Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check ☐ if the filing organization belongs to an affiliated group
- B** Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying)															
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying)															
<b>c</b> Total lobbying expenditures (add lines 1a and 1b)															
<b>d</b> Other exempt purpose expenditures															
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d)															
<b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns															
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f)															
<b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0-															
<b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0-															
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?															

☐ Yes ☐ No
**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

**Lobbying Expenditures During 4-Year Averaging Period**

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
<b>2a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2009

**Part II-B** Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities? If "Yes," describe in Part IV			
j Total Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

**Part III-A** Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	X
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	X
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?	3	X

**Part III-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes."

1 Dues, assessments and similar amounts from members	1	179,813.
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	2,209.
b Carryover from last year	2b	1,402.
c Total	2c	3,611.
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	17,981.
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	<14,370.>

**Part IV** Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i. Also, complete this part for any additional information.

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

OMB No 1545-1709

▶ File a separate application for each return.

- 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****Part I 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](http://www.irs.gov/efile) and click on *e-file for Charities & Nonprofits*

Type or print  File by the due date for filing your return. See instructions	Name of Exempt Organization	Employer identification number
	VERMONT FARM BUREAU, INC.	03-0185056
	Number, street, and room or suite no. If a P.O. box, see instructions 117 WEST MAIN STREET	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions RICHMOND, VT 05477	

**Check type of return to be filed** (file a separate application for each return)

- |                                                 |                                                                   |                                    |
|-------------------------------------------------|-------------------------------------------------------------------|------------------------------------|
| <input type="checkbox"/> Form 990               | <input type="checkbox"/> Form 990-T (corporation)                 | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL            | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input checked="" type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above)      | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF            | <input type="checkbox"/> Form 1041-A                              | <input type="checkbox"/> Form 8870 |

**CHRISTOPHER O'KEEFE**

- The books are in the care of ▶ **117 WEST MAIN STREET - RICHMOND, VT 05477**  
Telephone No ▶ **(802) 434-5646** 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) \_\_\_\_\_ If this is 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

- 1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until **FEBRUARY 15, 2011**, to file the exempt organization return for the organization named above. The extension is for the organization's return for
- ▶ ☐ calendar year \_\_\_\_\_ or
- ▶ ☒ tax year beginning **JUL 1, 2009**, and ending **JUN 30, 2010**

- 2 If this tax year is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period

<b>3a</b> 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	<b>3a</b>	\$
<b>b</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	<b>3b</b>	\$
<b>c Balance Due.</b> 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 System). See instructions	<b>3c</b>	\$ <b>N/A</b>

**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

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form **8868** (Rev. 4-2009)

FORM 990-EZ	OTHER EXPENSES	STATEMENT	1
DESCRIPTION		AMOUNT	
CONFERENCES & CONVENTIONS		25,793.	
INSURANCE		2,005.	
TRAVEL		21,374.	
MEALS & ENTERTAINMENT		979.	
ADVERTISING		203.	
ADMINISTRATOR		5,595.	
PAYROLL TAXES		17,262.	
INTEREST EXPENSE		3,786.	
LOBBYING EXPENSES		2,209.	
OFFICE EXPENSE		6,622.	
SUBSIDIARY LOSS		43,350.	
PROVISION FOR TAXES		530.	
MISCELLANEOUS		300.	
TOTAL TO FORM 990-EZ, LINE 16		130,008.	

FORM 990-EZ	OTHER ASSETS	STATEMENT	2
DESCRIPTION	BEG. OF YEAR	END OF YEAR	
ACCOUNTS RECEIVABLES	72,585.	32,773.	
PREPAID EXPENSES	11,351.	9,448.	
OTHER INVESTMENTS	270,774.	228,317.	
OTHER DEPRECIABLE ASSETS	3,647.	20,483.	
TOTAL TO FORM 990-EZ, LINE 24	358,357.	291,021.	

FORM 990-EZ	OTHER LIABILITIES	STATEMENT	3
DESCRIPTION	BEG. OF YEAR	END OF YEAR	
ACCOUNTS PAYABLE	138,847.	170,312.	
DEFERRED REVENUE	97,201.	72,810.	
OTHER LIABILITIES	30,143.	6,328.	
MORTGAGES AND OTHER NOTES PAYABLE	49,611.	65,776.	
TOTAL TO FORM 990-EZ, LINE 26	315,802.	315,226.	

FORM 990-EZ	OTHER REVENUE	STATEMENT	4
DESCRIPTION		AMOUNT	
CONTRACTUAL REVENUE		36,750.	
ADVERTISING INCOME		49,057.	
ANNUAL MEETING REVENUE		9,214.	
AGRICULTURAL RESOURCE CTR.		8,335.	
MANAGEMENT FEE		4,953.	
TOTAL TO FORM 990-EZ, LINE 8		108,309.	

FORM 990-EZ	OTHER CHANGES IN NET ASSETS OR FUND BALANCES	STATEMENT	5
DESCRIPTION		AMOUNT	
UNREALIZED (APPRECIATION) DEPRECIATION STOCK		<48.>	
TOTAL TO FORM 990-EZ, LINE 20		<48.>	

FORM 990-EZ	OCCUPANCY, RENT, UTILITIES AND MAINTENANCE	STATEMENT	6
DESCRIPTION		AMOUNT	
DEPRECIATION		4,977.	
OTHER EXPENSES		5,003.	
TOTAL TO FORM 990-EZ, LINE 14		9,980.	

FORM 990-EZ	CASH GRANTS AND ALLOCATIONS	STATEMENT	7
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CLASS OF ACTIVITY/GRANTEE'S NAME AND ADDRESS	GRANTEE'S RELATIONSHIP	AMOUNT
AWARDS	NONE	1,563.

TOTAL INCLUDED ON FORM 990-EZ, LINE 10

1,563.

FORM 990-EZ

INFORMATION REGARDING TRANSFERS  
ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS

STATEMENT 8

- A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS,  
DIRECTLY OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL  
BENEFIT CONTRACT? . . . . . [ ] YES [X] NO
- B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS,  
DIRECTLY OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT? . . [ ] YES [X] NO

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FORM 990-EZ                      PART IV - LIST OF OFFICERS, DIRECTORS,                      STATEMENT                      9  
                                          TRUSTEES AND KEY EMPLOYEES

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NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
JACKIE FOLSOM 2603 US ROUTE 2, CABOT, VT 05647	FORMER PRESIDENT 0.00	0.	0.	0.
DAVID MAJOR 875 PATCH ROAD, PUTNEY, VT 05346	1ST VICE PRESIDENT 0.00	0.	0.	0.
TED FOSTER 253 FOOTE ROAD, MIDDLEBURY, VT 05363	2ND VICE PRESIDENT 0.00	0.	0.	0.
GLADYS MILLER, 581 MILLER ROAD, E. DUMMERSTON, VT 05346	SECRETARY 0.00	0.	0.	0.
BRUCE SHIELDS 6405 GARFIELD ROAD, WOLCOTT, VT 05680	TREASURER 0.00	0.	0.	0.
ANDREA OCHS, 37 NEEDHAM HILL ROAD, ORWELL, VT 05760	TRUSTEE 0.00	0.	0.	0.
WILLIE RYAN PO BOX 24, CRAFTSBURY, VT 05826	AT LARGE EXEC. 0.00	0.	0.	0.
BILL WICKS 3347 WEST ROAD, BENNINGTON, VT 05201	TRUSTEE 0.00	0.	0.	0.
ELIZABETH GREENE 7D RACEWAY ROAD, JERICHO, VT 05465	AT LARGE EXEC. 0.00	0.	0.	0.
LAWRENCE HOWRIGAN, 375 HOWRIGAN ROAD, FAIRFIELD, VT 05455	TRUSTEE 0.00	0.	0.	0.
LEONARD KORZUN, 780 LOTTERY ROAD, CUTTINGSVILLE, VT 05738	TRUSTEE 0.00	0.	0.	0.
CHRISTOPHER O'KEEFE, 2083 EAST MAIN STREET, RICHMOND, VT 05477	FINANCE DIRECTOR 40.00	53,975.	9,678.	0.
TIM BUSKEY, 2083 EAST MAIN STREET, RICHMOND, VT 05477	ADMINISTRATOR 40.00	92,054.	17,684.	0.
WILLIAM SCOTT, 79 QUAKER STREET, NORTH FERRISBURG, VT 05473	AT LARGE EXEC. 0.00	0.	0.	0.

## VERMONT FARM BUREAU, INC.

03-0185056

CLARK W. HINSDALE III , 173 STATE PARK ROAD, CHARLOTTE, VT 05445	PRESIDENT 0.00	0.	0.	0.
TERRY GULICK, 376 PARKER HILL ROAD, SPRINGFIELD, VT 05156	TRUSTEE 0.00	0.	0.	0.
CHIP HELLUS, 42 HEMLOCK HILL ROAD, DUMMERSTON, VT 05301	TRUSTEE 0.00	0.	0.	0.
BARBARA BRAGG PO BOX 201, E. MONTPELIER, VT 05651	TRUSTEE 0.00	0.	0.	0.
JUSTIN POULIN, 3302 WEST STREET, BROOKFIELD, VT 05036	TRUSTEE 0.00	0.	0.	0.
CRAIG MAYO PO BOX 3568, STOWE , VT 05672	TRUSTEE 0.00	0.	0.	0.
DAVID LANE, 153 WEST SHORE ROAD, SOUTH HERO, VT 05486	TRUSTEE 0.00	0.	0.	0.
PAULETTE ROUTHIER 3399 VT RTE 102, BLOOMFIELD, VT 05905	TRUSTEE 0.00	0.	0.	0.
DEB GONYAW, PO BOX 268, ST. JOHNSBURY CTR., VT 05863	TRUSTEE 0.00	0.	0.	0.
JOHN FRANKLIN, 4708 WEATHERHEAD HOLLOW, GUILFORD, VT 05301	TRUSTEE 0.00	0.	0.	0.
RUPERT CHAMBERLAIN, 1552 CHAMBERLIN ROAD, BARTON, VT 05822	TRUSTEE 0.00	0.	0.	0.
BONNE KENDALL LOCKE, 1630 WEST GLOVER ROAD, IRASBURG, VT 05845	TRUSTEE 0.00	0.	0.	0.
TOTALS INCLUDED ON FORM 990-EZ, PART IV		146,029.	27,362.	0.

GOVERNMENT RELATIONS: EXPENSES RELATED TO LOBBYING AND ADVOCACY EFFORTS IN THE STATE LEGISLATURE THAT ARE OF CONCERN, OR SUPPORT VERMONT FARMERS IN LINE WITH THE EXEMPT PURPOSE OF THE VERMONT FARM BUREAU.



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STATEMENT 11

COMMUNICATIONS: EXPENSES RELATED TO THE VERMONT FARM BUREAU'S PUBLICATIONS  
AND CORRESPONDENCE IN SUPPORT OF VERMONT FARMERS DIRECTLY FOR THE EXEMPT  
PURPOSE OF THE VERMONT FARM BUREAU.

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STATEMENT 12

EDUCATION & LEADERSHIP DEVELOPMENT: EXPENSES RELATED TO EDUCATIONAL AND LEADERSHIP DEVELOPMENT PROGRAMS WHICH SUPPORT VERMONT FARMING AND PROMOTE THE EXEMPT PURPOSES OF THE VERMONT FARM BUREAU.

THE VERMONT FARM BUREAU REPRESENTS FARMERS FOR THE PURPOSE OF ANALYZING PROBLEMS AND FORMULATING ACTIONS TO ACHIEVE ECONOMIC, EDUCATIONAL AND SOCIAL ADVANCES.

FORM 990-EZ	OTHER PROGRAM SERVICES	STATEMENT	14
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## DESCRIPTION

## GRANTS

## EXPENSES

BOARDS & COMMITTEES: EXPENSES RELATING TO THE VERMONT  
FARM BUREAU BOARD AND COMMITTEE MEETINGS THAT HELP  
INFLUENCE AND MAKE DECISIONS AFFECTING VERMONT  
FARMERS.

0.	249,609.
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TOTAL TO FORM 990-EZ, LINE 31

249,609.
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