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·Form 99

SCANNED UCI 0 4 2010

Department of the Treasury Internal Revenue Service

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)

The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047 2009

Open to Public Inspection

Α.	For the 20	09 calendar v	ear, or tax year beginning 07/01/09 , and ending 06/30/10			
В	Check of applic		C Name of organization	D	Empl	oyer identification number
	Address chang	use IRS				•
	Name change	label or	Doing Business As		63	-0523367
-		type.	Number and street (or PO box if mail is not delivered to street address) Room/suite	E	Telep	hone number
	Initial return	See	306 West ByPass		334	4-222-8000
	Termination	Specific Instruc-	City or town, state or country, and ZIP + 4	G	Gross rec	eipts \$ 68,981
	Amended retui	1.	Andalusia AL 36420			
	Application per		e and address of principal officer	H(a	a) is this	a group return for
		Ru	ssell Wiggins		affilia	
		I I	178 Wiggins Farm Road	110	b) Are a includ	l affiliates Yes No
			dalusia AL 36420		If "No	attach a list (see instructions)
1_	Tax-exempt	status 2	501(c) (5) ◀ (insert no) 4947(a)(1) or 527			
J	Website [.]		F-107			exemption number
		zation X Co	rporation Trust Association Other ▶ L Year of formation	194	:7	M State of legal domicile AI
_ <u>F</u>	Part I	Summa				
		-	he organization's mission or most significant activities.			
ė	S	ee Sche	dule O			
auc						
ern			د-سم			
Activities & Governance	2 Che	ck this box	I if the organization discontinued its operations or disposed of more than 25% of its net as	sets		
∞ ∞	3 Num	nber of voting	members of the governing body (Part VI, line 1a)		3	30
ies	4 Num	nber of indep	endent voting members of the governing body (Part VI, line 1b)		4	30
<u>₹</u>	5 Tota	I number of	employees (Part V, line 2a)		5	0
Act	6 Tota	I number of	volunteers (estimate if necessary)		6	25
_	7a Tota	l gross unrel	ated business revenue from Part VIII, column (C), line 12		7a	
	b Net	unrelated bu	siness taxable income from Form 990-T, line 34		7b	0
	ļ			r Year		Current Year
<u>o</u>	8 Cont	tributions and	d grants (Part VIII, line 1h)			
Revenue	9 Prog	ram service	revenue (Part VIII, line 2g)	47,		46,233
ě	ľ		ne (Part VIII, column (A), lines 3, 4, and 7d)	23,	590	22,748
			art VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			
			dd lines 8 through 11 (mustleque/Perf)VIII, column (A), line 12)	71,4		68,981
	13 Gran	its and simila	r amounts paid (Part IX, column-(A),-lines_1-3)	12,0	085	6,900
			r for members (Par() X, Column (A), lige 4)			
es	15 Sala	ries, other co	mpensation, employee benefits (Part X, colorin (A), lines 5–10)	3,9	996	3,823
ટ	16a Profe	essional func	raising fees (Part IX, cotumn-(A), line 11e) or			
Exper			expenses (Part IX continue to) Interest (Part IX continue to)			<u> </u>
ш	17 Othe	r expenses (Part IX, column (A), lines 11a-11d, 111-24f)	56,3		52,359
	18 Total	expenses /	Add lines 13–17 (must equal Part IX, column (A), line 25)	72,4		63,082
	19 Reve	nue less exp	penses Subtract line 18 from line 12	-1,(5,899
Net Assets or Fund Balances			Beginning of		$\overline{}$	End of Year
sse	20 Total	assets (Par	•	45,4	152	751,351
let A	21 Total	•	art X, line 26)	. A E .	453	751 351
<u>-ब</u>	22 Net a			45,4	45Z	751,351
_P	art II	Signatur				
			es of perjury, I declare that I have examined this return, including accompanying schedules and statements, a In true, correct, and complete Declaration of preparer (other than officer) is based on all information of which			
٥.			111.	1	al.	مار
Sig		100	my veg	1	<u> </u>	
Her	e		e of officer isell Wiagins President		Date	
	1					
		Type or	print name and the			Departs destinant analysis
Paid	4	Preparer's	self	eck if	-	Preparer's identifying number (see instructions)
	parer's	signature	Margaret V. Little, CPA 08/09/10 emp	oloyed 🕨	· <u></u> -	P00369759
	Only	Firm's name	or yours Little & Davis, P.C.	E	EIN 🕨	16-1636259
USE	City	ıf self-employ	ed), 864 S Three Notch St	F	Phone	
		address, and	ZIP+4 Andalusia, AL 36420	<u>, r</u>	no 🕨	334-222-2456
May	the IRS dis	cuss this ret	urn with the preparer shown above? (see instructions)			Yes No

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

(Expenses \$

4d Other program services (Describe in Schedule O)

4e Total program service expenses ▶

including grants of \$

50,149

) (Revenue \$

Form 990 (2009)

Is the organization described in section 501(c)(3) or 4917(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 2 is the organization organization organized to complete Schedule B, Schedule of Contributions? 3 Od the organization organge in direct or indirect political campaging attivities on behalf of or in opposition to candidates for public office? If "Yes" complete Schedule C, Part I I Section 591(c)(3) organizations. Did the organization engage in lobbying activities on behalf of or in opposition to candidates for public office? If "Yes" complete Schedule C, Part I I Section 591(c)(4), 591(c)(5), and 591(c)(6) organizations is the organization subject to the section 6033(e) notice and reporting requirement and proxy tray. Pfire," complete Schedule C, Part I I Section 591(c)(4), 591(c)(5), and 591(c)(6) organizations is the organization receiver and proxy tray. Pfire," complete Schedule C, Part I I Od the organization receiver or hold a conservation enwestment of amounts in such funds or accounts' H*Yes," complete Schedule D, Part I I Od the organization receiver or hold a conservation enwestment of amounts in such funds or accounts' H*Yes," complete Schedule D, Part I I Od the organization receiver or hold at conservation examination and the provision of the organization receiver or hold at conservation examination and the provision of the organization receiver or hold at conservation examination and the provision of the organization receiver or hold at conservation examination and the organization receiver or hold at conservation examination and the provision of the organization receiver or hold at conservation examination and the provision of the organization receiver or hold at conservation examination and the provision of the organization receiver and anount in Part X, line 10 H*Yes," complete Schedule D, Part V I 10 Dd the organization report an amount in or accountation organization service and the provision provision and amount for meximization. Part X, line 10 H*Yes," complete Sc		art iv Checklist of Reduired Schedules				
complete Schedule A 2 fe the organization required to complete Schedule B. Schedule of Contributors? 3 Did the organization engage in direct or indirect political campagin activities on behalf of or an opposition to candidates for public office? If "Yes," complete Schedule C, Part II 3 Section 501((3)) organizations. Did the organization engage in tolopying activities? If "Yes," complete Schedule C, Part II 5 Section 501((4)4), 501(4	to the exemplation described in section 501/cV2) or 4047/cV1) (other than a private foundation)? If "Ves."			Yes	No
2 is the organization regulared to complete Schedule B, Schedule of Controlutors? 3 Did the organization engage in direct or undered pollutal campagin advises on behalf of or in opposition to candidates for public official? If "Yes," complete Schedule C, Part II 4 Section 501(c)(3) organizations. Did the organization engage in todaying activities? If "Yes," complete Schedule C, Part II 5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations is the organization subject to the section 6033(c) incide and reporting requirement and prizzy tiaz? If "Yes," complete Schedule C, Part III 6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part III 7 Did the organization maintain any donor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part III 8 Did the organization maintain any donor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part III 9 Did the organization report an amount in Part X, line 21, series as a custoden for amounts not listed in Part X, or provide order to cursissing, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 10 Did the organization report an amount in Part X, line 21, series as a custoden for amounts not listed in Part X, or younglete Schedule D, Part IV 10 Did the organization service by or through a related organization, hold assets in term, permanent, or quasis-endowments? If "Yes," complete Schedule D, Part V, VI, VIII, IX, or X as applicable 10 Did the organization statement any of the following quasissins "Yes?" If so, complete Schedule D, Part V, VI, VIII, IX, or X as applicable 11 Did the organization statement and amount for orther isolations in Part X, line 10? If "Yes," complete Schedule D, Part X VIII 11 Did the organization statement and proteins and proteins and proteins and protein	,			۱.		Y
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19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 19 X				18		Х
If "Yes," complete Schedule G, Part III	19	·				
				19		Х
	20	·				

	·		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations	ŀ		İ
	in the United States on Part IX, column (A), line 17 If "Yes," complete Schedule I, Parts I and II	21	X	<u> </u>
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	1	X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated	ĺ		
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			ļ
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K If "No," go to line 25	24a	<u> </u>	X
þ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	<u> </u>	
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			ļ
	to defease any tax-exempt bonds?	24c	ļ	
ď	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	1	
25a				ļ
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		ļ
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			ļ
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or		İ	
	990-EZ? If "Yes," complete Schedule L, Part I	25b	<u> </u>	
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			1
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	ļ	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	27		_X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,		1	
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	İ		
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a	ŀ		
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,		l	
	Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		_ <u>X</u> _
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	1 1		
	conservation contributions? If "Yes," complete Schedule M	30		_X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		- 1	
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		<u>X</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,		1	
_	III, IV, and V, line 1	34		<u>x</u>
5	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
_	Schedule R, Part V, line 2	35		<u> </u>
6	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
~	organization? If "Yes," complete Schedule R, Part V, line 2	36		
7	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	1 1		
	Part VI	37		<u>X</u>
8	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	

Form **990** (2009)

_P	art V Statements Regarding Other IRS Filings and Tax Compliance			т—
4-	Fotos the grapher asserted in Pour 2 of Form 1000 Appeal Cummon, and Transmitted of		Yes	No
1a				
L	C Morniston Control of Mark application			
b	Enter the harrise of the state			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	10	 	х
22		1c		<u> </u>
2a	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
b	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see	20		
	instructions)			1
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
Ja	this return?	3a		х
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	35		
74	over, a financial account in a foreign country (such as a bank account, securities account, or other financial		1	
	account)?	4a	ļ	Х
b	If "Yes," enter the name of the foreign country	74		
-	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank		l	
	and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	-		
	Prohibited Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	1		
	organization solicit any contributions that were not tax deductible?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6ь		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a	i	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal		- 1	
	benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as]	
	required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		-	
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	$-\downarrow$	
0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12	_		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities [10b]	-		
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders 11a	-		
	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them) [11b] Section 4947(a)(4) per exempt charitable trusts. Is the graphization filing Form 990 in liquid Form 10412.	- ₄₀₋		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
<u></u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

_	Schedule O. See instructions.					
Se	ction A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body	1a	30			
b	Enter the number of voting members that are independent	1b	30			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with				1	
	any other officer, director, trustee, or key employee?			2	X	L.
3	Did the organization delegate control over management duties customarily performed by or under the direct					
	supervision of officers, directors or trustees, or key employees to a management company or other person?			3	1	X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed	۱۶		4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?			5		X
6	Does the organization have members or stockholders?			6	1	Х
7a	Does the organization have members, stockholders, or other persons who may elect one or more members					
	of the governing body?			7a		x
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during				1	
	the year by the following					
а	The governing body?			8a	x	
b	Each committee with authority to act on behalf of the governing body?			8b	X	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			0.5		
·	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Int	ernal				
	venue Code)	Siriai				
1101	ondo oodo j				Yes	No.
10a	Does the organization have local chapters, branches, or affiliates?			10a	163	X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			104		
D	affiliates, and branches to ensure their operations are consistent with those of the organization?			10b		
11	Has the-organization provided a copy of this Form 990 to all members of its governing body before filing the			100	- 	
••	form?			11		x
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990			''-		
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13			120	х	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			12a	^	
D	rise to conflicts?			405	x	ļ
_				12b	^	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			4.0	x	
42	describe in Schedule O how this is done			12c		
13	Does the organization have a written whistleblower policy?			13	-	<u> X</u>
14	Does the organization have a written document retention and destruction policy?			14	X	
15	Did the process for determining compensation of the following persons include a review and approval by					
_	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				ľ	37
a	The organization's CEO, Executive Director, or top management official			15a		<u>X</u>
b	Other officers or key employees of the organization			15b		<u>X</u>
40-	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)				İ	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement					.,
	with a taxable entity during the year?			16a		<u> </u>
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate					
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard				- [
	the organization's exempt status with respect to such arrangements?			16b		
	ion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed AL					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)				
	available for public inspection. Indicate how you make these available. Check all that apply					
	Own website Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest					
	policy, and financial statements available to the public					
20	State the name, physical address, and telephone number of the person who possesses the books and records of the					

Andalusia

organization > Dorothy Thompson

13461 Gantt-Red Level Rd. AL 36421

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees. See instructions for definition of "key employee."

. Check this box if the organization did not compensate any current officer, director, or trustee

- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors; institutional trustees, officers, key employees, highest compensated employees; and former such persons

(A) Name and Title	(B) Average			(C)	hat ap		(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	Individual trustee or director		Officer		Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Dorothy Thompson										
Assist. Sec.	10.00	x		X				3,823	0	0
Russell Wiggins										
President	20.00	x		X				0	0	0
Richard Jones										
Vice Preside	5.00	X		X				0	0	0
Jimmy Rodgers										
Sec/Treas.	5.00	X		X				0	0	0
Jerry Foshee							·			
Director	1.00	x						0	0	0
Charles Henley										
Director	1.00	\mathbf{x}						0	0	0
Chris Meeks	-									
Director	1.00	$ \mathbf{x} $						0	0)	0
Kenneth Northey	-									
Director	1.00	X						0	0	0
Earl Prather										
Director	1.00	X						0	0	0
Danny Sightler										
Director	1.00	$ \mathbf{x} $						0	0	0
Jim Waite							İ			
Director	1.00	X						0	0	0
Glen Walters										
Director	1.00	X						0	0	<u> </u>
Chris Adams				}	7					
Director	1.00	Х						0	0	0
Karl Brown										
Director	1.00	X						0	0	0
Debra Foshee										
Director	1.00	X						0	0	0
Joey Holt										
Director	1.00	Х						0	0	0
Ben Courson		\Box	\neg		\neg		\neg			
Director	1.00	X						0	0	0
DAA										Form 990 (2009)

Part VII Section A Officers	, Directors, Tru	stees	s, Ke	y En	nplo	yees	, and	d Highest Compensated E	mployees (continued)			
(A)	(B)			() chec)	C)	.		(D)	(E)	,	(F)	
Name and Title	Average hours per week	or director		Officer	Key employee	Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	amo comp fro orgai and	imated ount of other ensation the nization related nizations	
Steven Williams												
Director	1.00	X						0	0			0
Farrell Wright												
Director	1.00	X	ļ					0	0			0
David Wyatt		İ										_
Director	1.00	X						0	0			0
Lamar Foley										ı I		_
Director	1.00	X	_					0	0			0
Nolan Laird		l l							_			_
Director	1.00	X						0	0			0
Claude Pike	1 00	,,										_
Director Dadasas	1.00	Х		\Box				0	0			0
Lloyd Rodgers	1 00			ŀ			ŀ	٥				_
Director Morgan Rodgers	1.00	X		-				0	0			0
Director	1.00	$ \mathbf{x} $					l	o	o			^
Roger Sightler	1.00					-	\dashv					0
Director	1.00	x						o	o			^
Gene Wiggins	1.00	^			-	-						0
Director	1.00	$ _{\mathbf{x}} $		i	- 1			o	o			0
Jeff Zorn	1.00	-				\dashv						
Director	1.00	x					Ì	o	o			0
Tommy Thompson				$\neg \dagger$		7	\neg					
Director	1.00	x		İ			ı	o	o			0
Ricky Wiggins					寸				,			
Director	1.00	x						ol	0			0
1b Total			·····				•	3,823				<u>-</u> _
2 Total number of individuals (incl	uding but not lim	ıted t	o the	se li	sted	abov	e) w		0,000 in			
reportable compensation from the	ne organization)	0				·					
											Yes	No
3 Did the organization list any fori							oyee	, or highest compensated				
employee on line 1a? If "Yes," c										_ 3	 	X
4 For any individual listed on line the organization and related org		•						·				
individual	amzations great	JI 1110	ψι	30,0			.s, c	complete ochedule a loi suc	41 T	4		x
5 Did any person listed on line 1a	receive or accru	e con	npen	satio	n fro	m ar	ıy ur	related organization for		ļ		_
services rendered to the organiz		compl	lete S	Sche	dule	J for	suc	h person		5		X
Section B. Independent Contractor								-				
 Complete this table for your five compensation from the organiza 		sated	inde	epend	dent	cont	racto	ors that received more than	\$100,000 of			
Name and b	(A) usiness address	_						Descriptio	B) n of services	C	(C) ompensat	ion
											,	
						\dashv						

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶

0

P	art V	<u>/III Stater</u>	ment of Reve	nue				,	, · · · · - · · · · · · · · · · · · 	
	-						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
9.9	1a	Federated car	mpaigns	1a		·				
Contributions, gifts, grants and other similar amounts		Membership d		1b						
95	ءَ ا	: Fundraising e		1c						
ifts	٦	Related organ		1d						
S E		Government grants		1e						
Ö		All other contribution		"						
E P	'		not included above	1f						
	۱ ـ	. Alexandr anninhuu	ins included in lines 1a-							
Ö	g			II 49						
	l i	Total. Add line	es 1a-11			Busn Code				
ğ	2-	**	Liter Barrie			Busii Code	46,233			46,233
ě	2a		hip Dues				10,233			10,233
ë	b									
Ž	C						··· -·		· · · · · · · · · · · · · · · · · · ·	
Š	d									
Jran	e ,									
Program Service Revenue	1		am service reven	ue	l	•	46,233			
_	9		come (including d	udondo	interest		10,233			
	3			ividerius	, iiileiesi	, and	22,748			22,748
		other similar a			hand are	· -	22,740			22,740
	4		rvestment of tax-	exempt	bona pro	Leeus -				
	5	Royalties	(ı) Real	[(n) Pa	ersonal	,			
		C D	(i) Keai	 	(11) 1 (ersonar				
	6a									
	b	Less rental exps						п		
	С	Rental inc or (loss)		1						
	d 7a	Net rental inco Gross amount from	(i) Securities			Other		<u> </u>		
		sales of assets	(i) Securities		(11)	J. Tilei				
		other than inventory								
	D	Less cost or other					:			
		basis & sales exps		-						
		Gain or (loss)				—				
	d	,							,	
ne	ва		om fundraising even	is						
ē		(not including \$		ì					İ	
Re.			eported on line 1c)			ľ				
Other Revenue		See Part IV, line		a b						
ott		Less direct ex			·onto					
			(loss) from fundra		vents					
	Уa	See Part IV, line	om gaming activities	ı						
	L			а ь	_					
		Less direct ex				•				
			(loss) from gamir	ig activit	iles					
	าบล	Gross sales of returns and allo		_						
ı	L			a b						
		Less cost of go			tone	•				
ł	C		(loss) from sales ellaneous Revenue	or inven		Busn. Code		·- · ·		
	11a	IVIISCE	J			20 0000				
İ					-			· · · · · · · · · · · · · · · · · · ·		
ŀ	b							 		
l	2	All other revenu	10		F			. =		
ľ		Total. Add line:			L					
			s i ra- i ru e. See instruction	\$			68,981	0	0	68,981
,	. ~			_		- 1	,	•		

Part IX Statement of Functional Expenses

Form 990 (2009)

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	o not include amounts reported on lines 6b, b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1					
	organizations in the U.S. See Part IV, line 21	6,900	6,900		
2	Grants and other assistance to individuals in			·	
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	3,823		3,823	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				-
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а					
b	*				· · · · · · · · · · · · · · · · · · ·
С	, · · .	979		979	
ď					
e	5 () () 6 5 10 1 47				·
f	Investment management fees				
g					
12	Advertising and promotion	384		384	
13	Office expenses	514		514	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
. •	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	42,724	42,724		
20	Interest	~~, / 4 1	22,721		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
	insurance				··
24	Other expenses Itemize expenses not				
	covered above. (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below)		ļ		
а	Membership Billing & Proc	4,313		4,313	
a b	Promotions	1,794		1,794	
	Postage	727		727	
ď	Petting Zoo	525	525	121	
	Bond Fee & Insurance	399		399	
e f	All other expenses	399			
	·	63,082	50,149	12,933	
	Total functional expenses. Add lines 1 through 24f	03,082	50,145	14,933	
	Joint costs. Check here ▶ if following SOP 98-2 Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and				
Ā	fundraising solicitation				Form 990 (2

Part	X Balance Sheet	(A)	(B)
		Beginning of year	End of year
1	Cash—non-interest bearing	1	
2	Savings and temporary cash investments	745,452 2	751,35
3	Pledges and grants receivable, net	3	
4	Accounts receivable, net	4	
5	Receivables from current and former officers, directors, trustees, key		
	employees, and highest compensated employees. Complete Part II of		
ļ	Schedule L	5	
6	Receivables from other disqualified persons (as defined under section		
	4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete		
_	Part II of Schedule L	6	
2 7	Notes and loans receivable, net	7	
7 8	Inventories for sale or use	8	
۶ ۲	Prepaid expenses and deferred charges	9	I
10a	Land, buildings, and equipment, cost or		
	other basis. Complete Part VI of Schedule D 10a		
l b	Less accumulated depreciation 10b	10c	
11	Investments—publicly traded securities	11	
12	Investments—other securities See Part IV, line 11	12	
13	Investments—program-related See Part IV, line 11	13	
14	Intangible assets	14	
15	Other assets See Part IV, line 11	15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	745,452 16	751,35
17	Accounts payable and accrued expenses	17	
18	Grants payable	18	
19	Deferred revenue	19	
20	Tax-exempt bond liabilities	20	
2 21	Escrow or custodial account liability Complete Part IV of Schedule D	21	
22	Payables to current and former officers, directors, trustees, key		
22 22 22 24 25 27	employees, highest compensated employees, and disqualified		
<u> </u>	persons Complete Part II of Schedule L	22	
23	Secured mortgages and notes payable to unrelated third parties	23	
24	Unsecured notes and loans payable to unrelated third parties	24	
25	Other liabilities Complete Part X of Schedule D	25	
26	Total liabilities. Add lines 17 through 25	26	
?	Organizations that follow SFAS 117, check here ▶ and		
27 28	complete lines 27 through 29, and lines 33 and 34.		
27	Unrestricted net assets	27	
28	Temporarily restricted net assets	28	
	Permanently restricted net assets	29	
•	Organizations that do not follow SFAS 117, check here ▶ X		
	and complete lines 30 through 34.		
30	Capital stock or trust principal, or current funds	30	
31	Paid-in or capital surplus, or land, building, or equipment fund	31	
32	Retained earnings, endowment, accumulated income, or other funds	745,452 32	751,351
29 30 31 32 33 34	Total net assets or fund balances	745,452 33	751,351
34	Total liabilities and net assets/fund balances	745,452 34	751,351

Form **990** (2009)

Form 990 (2009)

the Single Audit Act and OMB Circular A-133?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the

required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form 990 (2009)

3a

3b

SCHEDULE (Form 990)

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, lines 21 or 22.

2009 OMB No 1545-0047

▶ Attach to Form 990.

Open to Public Inspection

Open to Public Inspection			X Yes	"Yes" to han \$5,000. Use ∑							
	Employer identification number	03-026350/	p	Organizations in the United States. Complete if the organization answered "Yes" to reived more than \$5,000. Check this box if no one recipient received more than \$5,00 acce is needed	(g) Description of non-cash assistance						
nes 21 or 22.	Employer	0-60	s or assistance, an	plete if the orgif no one recip	(f) Method of valuation (book, FMV, appraisal, other)						
Complete in the organization answered "Yes" on Form 990, Part IV, lines 21 or 22.			eligibility for the grants	ited States. Com Check this box	(e) Amount of non-cash (f) Method of valuation assistance (book, FMV, appraisa), other)						
answered "Yes" on Fo Attach to Form 990.	£		stance, the grantees'n the United States	zations in the Un lore than \$5,000 needed	(d) Amount of cash grant						
rganization	4 4 5	1000	ants or assu	d Organizaceived maspace is r	(c) IRC section if applicable		_				
	armere Hod	Assistance	ne amount of the grace?	vernments an ecipient that re) if additional s	(b) EIN						organizations
	anzaton Covington County Barmers	General Information on Grants and Assistance	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	(a) Name and address of organization or government						Enter total number of section 501(c)(3) and government organizations
Department of the Treasury Internal Revenue Service	Name of the organization	Part	1 Does the the selection 2 Describ	Part II	-					1	2 Enter to

Schedule I (Form 990) 2009

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. DAA

3 Enter total number of other organizations

Page 2

Schedule I (Form 990) 2009 Covington County Farmers Federation 63-0523367

(f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance Use Part IV and Schedule I-1 (Form 990) if additional space is needed (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance Part IV

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009 Open to Public

Inspection

OMB No 1545-0047

Name of the organization

Covington County Farmers Federation

Employer identification number 63 - 0523367

Form 990 - Organization's Mission or Most Significant Activities

To create a county-wide organization to advance and improve the agriculture of the county; to cooperate with the Alabama Farmers Federation; to develop a definite program of work that will bring to the county better economic, social and educational conditions so as to make farming more profitable and rural life more attrative.

Form 990, Part VI, Line 2 - Related Party Information Among Officers

Richard Jones

Dorothy Thompson

Vice Preside

Assist. Sec

Uncle

Form 990, Part VI, Line 11A - Organization's Process to Review Form 990 Directors balance amounts reported on returns to bank accounts

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

Each director is required to sign a conflict of interest statement after

annual meeting. No change in directors are made until next annual meeting.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Upon request

00	Δr	- 0	2	07
63-	·U:)Z,	33	0 <i>1</i>

Federal Statements

Taxable Interest on Investments

Description	 Amount	Unrelated Business Code	Exclusion Code	Postal Code	Acquired after 6/30/75
Interest-Taxable	\$ 22,748		14	AL	
Total	\$ 22,748				