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MAY

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

Open to Public Inspection

For the 2011 calendar year, or tax year beginning 20 D Employer identification number C Name of organization Florence County Farm Bureau Check if applicable 57-0343186 Address change Doing Business As Number and street (or P O box if mail is not delivered to street address) E Telephone number Name change 803-936-4676 PO Box 12320 Initial return City or town, state or country, and ZIP + 4 Terminated Florence, SC 29504-2320 G Gross receipts \$ Amended return Charles Brigman H(a) Is this a group return for affiliates? ☐ Yes ✓ No F Name and address of principal officer Application pending Same as C above H(b) Are all affiliates included? Yes No If "No," attach a list (see instructions)) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527 **☑** 501(c) (Tax-exempt status 501(c)(3) 2393 Website: ▶ H(c) Group exemption number ▶ L Year of formation M State of legal domicile SC Part I Summary Promote Agricultural Interests Briefly describe the organization's mission or most significant activities. Activities & Governance 2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 3 15 Number of independent voting members of the governing body (Part VI, line 1b) 4 15 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 5 5 6 45 Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12 7a 138026 7a Net unrelated business taxable income from Form 990-T, line 34 0 Current Year 103292 Contributions and grants (Part VIII, line 1h) . . . Revenue Program service revenue (Part VIII, line 2g) 2120 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . 706 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 138006 Total revenue add lines 8 through 11 (must equal Part VIII, column (A), line 12)
Grants and similar amounts paid (Part IX, column (A), lines 1–3)
Benefits paid to & gifer members (Part IX, column (A), line 4)
Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 244124 100 0 15 133805 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 Total-fundfaising expenses (Part IX, column (D), line 25) ▶ 94090 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 227995 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses. Subtract line 18 from line 12 16129 Beginning of Current Year **End of Year** 20 Total assets (Part X, line 16) 463443 Total liabilities (Part X, line 26) 21 O 22 442229 Net assets or fund balances. Subtract line 21 from line 20 463443 Part II Signature Block 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 prepared (other than officer) is based on all information of which preparer has any knowledge Sign Here Type or print name and title Print/Type preparer's name Date PTIN Preparer's signature Paid Check I if self-employed **Preparer** Firm's EIN ▶ Firm's name Use Only May the IRS discuss this return with the preparer shown above? (see instructions) 🗌 Yes 🗌 No Form 990 (2011) For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y



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	. 🗸
<u>· ·</u>	<u> </u>
Yes	☑ No
Yes	√ No
res	V NO
	sured by nount of
	_

) (Revenue \$

(Expenses \$

Other program services (Describe in Schedule O.)

including grants of \$

Part I	V Checklist of Required Schedules			-
	,		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1_		✓
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		✓
3	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	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			-
•	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5_		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III			
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part	8		√
3	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		/
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10		-
_	VII, VIII, IX, or X as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
a	complete Schedule D, Part VI	11a	✓	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		✓
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X .	11f		✓
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		1
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		✓
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
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			<u>,</u>
20 ~	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19 20a	-	V
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		+

Part	V Checklist of Required Schedules (continued)			
-			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
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
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 employees? If "Yes," complete Schedule J	23		✓
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$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		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		_
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		
b	Is the organization 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	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		√
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions).			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		√
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29		✓
31	conservation contributions? If "Yes," complete Schedule M	30		✓
	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		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	<u> </u>	✓
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		
37	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,			
	Part VI	37	<u> </u>	/
38	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	✓	

Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V			_ 🗆
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
0-	reportable gaming (gambling) winnings to prize winners?	1c	✓	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.			
	clater restriction and tell and calculate year contents year year contents year year contents year year year year year year year year	2b	- <u>-</u> -	
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	20		
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	~_	
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Schedule O</i>	3b	▼	_
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority		•	
Tu	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		✓
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	<u></u>		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>5a</u>		✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			,
h	organization solicit any contributions that were not tax deductible?	6a		✓
b	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	OD		
a	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		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	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			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7е		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	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.	<u> </u>		
a	Did the organization make any taxable distributions under section 4966?	9a		
_ b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12			
a b	Initiation fees and capital contributions included on Part VIII, line 12	-		
11	Section 501(c)(12) organizations. Enter	1		
''a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources	i		
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans	1		
С	Enter the amount of reserves on hand	1	<u> </u>	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		✓
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b		<u> </u>

Part \					
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes				
	Check if Schedule O contains a response to any question in this Part VI	<u> </u>	<u>· · · · · · · · · · · · · · · · · · · </u>	- • -	. 🗸
Section	on A. Governing Body and Management			1 24	
				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		5		-
	If there are material differences in voting rights among members of the governing body, or		l		
	if the governing body delegated broad authority to an executive committee or similar				İ
_	committee, explain in Schedule O.	46	اء		
b	Enter the number of voting members included in line 1a, above, who are independent		15		
2	Did any officer, director, trustee, or key employee have a family relationship or a business rany other officer, director, trustee, or key employee?	elationship with		-	
2	Did the organization delegate control over management duties customarily performed by or	under the direct		V	
3	supervision of officers, directors, or trustees, or key employees to a management company or other		` 3		./
	,		4		<u> </u>
4	Did the organization make any significant changes to its governing documents since the prior Form 99		5		/
5	Did the organization become aware during the year of a significant diversion of the organization	on s assets?	6		/
6	Did the organization have members or stockholders?	olect or appoin	_	_	
7a	one or more members of the governing body?	elect of appoint	7a		1
	Are any governance decisions of the organization reserved to (or subject to approval	by/ members			-
b	stockholders, or persons other than the governing body?		' 7b		1
	Did the organization contemporaneously document the meetings held or written actions un				-
8	the year by the following:	dertaken dunng	'		
_	The governing body?		8a	1	
a	Each committee with authority to act on behalf of the governing body?		8b	1	
ь 9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot	ot he reached a		 	
3	the organization's mailing address? If "Yes," provide the names and addresses in Schedule C		` ₉		1
Section	on B. Policies (This Section B requests information about policies not required by the			ode)
00011	on bit ones (The cooler bioquete mornandi about period of the cooler by			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a	† · · ·	1
	If "Yes," did the organization have written policies and procedures governing the activities of	f such chapters		İ	
_	affiliates, and branches to ensure their operations are consistent with the organization's exem		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before		11a		1
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	1	1
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	e rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the i	oolicy? If "Yes,	,		
	describe in Schedule O how this was done		12c		ļ
13	Did the organization have a written whistleblower policy?		13		√
14			14		✓
15	Did the process for determining compensation of the following persons include a review a		/		1
	independent persons, comparability data, and contemporaneous substantiation of the deliberation				
а	The organization's CEO, Executive Director, or top management official		15a	<u> </u>	✓
b	Other officers or key employees of the organization		15b	ļ	✓_
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar to the contribute assets to a participate in a joint venture or similar to the contribute assets to a participate in a joint venture or similar to the contribute assets to a participate in a joint venture or similar to the contribute assets to a participate in a joint venture or similar to the contribute assets to a participate in a joint venture or similar to the contribute assets to a participate in a joint venture or similar to the contribute assets to a participate in a joint venture or similar to the contribute assets to a participate in a joint venture or similar to the contribute assets to a participate in a joint venture or similar to the contribute assets to a participate in a joint venture or similar to the contribute assets to a participate in a joint venture or similar to the contribute assets to a participate and the contribute assets to a participate and the contribute assets to a participate and the contribute assets to a participate and the contribute assets to a participate and the contribute assets to a participate and the contribute assets to a participate and the contribute assets and the contribute asse	lar arrangemen		<u> </u>	
	with a taxable entity during the year?		16a	<u> </u>	✓
b	If "Yes," did the organization follow a written policy or procedure requiring the organization				1
	participation in joint venture arrangements under applicable federal tax law, and take steps to			·	
	organization's exempt status with respect to such arrangements?		16b	<u> </u>	l
	on C. Disclosure			_	
17	List the states with which a copy of this Form 990 is required to be filed South Carolina	and 000 T (Cc-+	on F01	(0)(2)	. 001: 1
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a	110 990-1 (Sect	UII 5U1	(८)(७)	ь опіу
	available for public inspection. Indicate how you made these available. Check all that apply				
40	Own website Another's website Upon request	imonto confict	of into	roct -	oles:
19	Describe in Schedule O whether (and if so, how), the organization made its governing doci and financial statements available to the public during the tax year.	aments, conflict	OI IIILE	nest [JUICY,
20	State the name, physical address, and telephone number of the person who possesses the b	ooke and recor	te of th	_	
20	organization: S.C. Farm Burgau, 724 Knox Abbott Drive, Cavice, S.C. 29033, 803-936-4676	ouns and record	UI ال در	U	

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Form		

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

- 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, if any See instructions for definition of "key employee."
- 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.

Check this box if neither the organization r	or any relate	d org	anız			ompe	ensa	ted any currer	t officer, directo	r, or trustee.
					C)					
(A)	(B)	l (do n	not ch		ition		one	(D)	(E)	(F)
Name and Title	Average hours per week	(do not check more than one box, unless person is both an officer and a director/trustee)				is both	n an tee)	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Jimmy H Bacot]	:				
Director	0.30	✓	_	ļ				0	0	0
(2) Laverne Bazen										
Director	0.30	1						0	0	0
(3) Phil Britton]		1	İ						
Director	0 30	✓						0	0	0
(4) Johnny Cox				Ì						
Director	0 30	✓						0	0	0
(5) M. D. Floyd										
Director	0.30	✓						0	0	0
(6) Dickie Kirby									1	
Director	0.30	✓						0	0	0
(7) Bussy Poston										
Director	0.30	1						0	0	o
(8) Andy Rodgers										
Director	0.30	✓			-			0	0	0
(9) Raleigh Ward						1				
Director	0.30	1	1					0	о	0
(10) Howard Weaver										
Director	0.30	✓	}					0	0	0
(11) Weston Weldon										
Director	0.30	1						o	0	0
(12) Rhett Bacot		\vdash		Ħ			İ		· <u>-</u>	
Womens Committee Chair	0.30	1						0	0	0
(13) Charles Brigman						t	T			<u> </u>
President	0.30			1			1	0	l 0	0
(14) Sterling Sadler			T		T	t	T			
V.P.	0.30	1		1		1		0	o	o

Part	VII Section A. Officers, Directors, Trust	tees, Key E	mploy	/ees			lighes	st C	ompensated E	mployees (con	inuec	1)		
					•	C) Ition			(5)	,			_	
	(A)	(do not check more than one							(D)	(E)			F)	
	Name and title	Average hours per					ıs both or/trust		Reportable compensation	Reportable compensation from	n		nated unt of	
		week		_		_		<u> </u>	from	related			her	
		(describe hours for	호호	ıstıt	Officer	Key 6	曹	Former	the organization	organizations (W-2/1099-MISC)	.	compe	insatioi n the	n
		related	ect	튜	의 역	employee	est c	重	(W-2/1099-MISC)				ızatıon	į
		organizations	익호	<u>a</u>		οy	ĕ	l					elated	_
		in Schedule O)	Individual trustee or director	Institutional trustee		ď	Pen					organi	zations	j
		"	"	ê			Highest compensated employee							
(15) Te	rry Vause				-									
	ary-Treas.	0.30			✓				0		0			0
(16)									0		0			0
(17)												•		
(18)		<u> </u>		-		_		_	0		0			0
									0		0			0
(19)		-							0		0			0
(20)														
(21)			_					-	0		0			0
						_		<u> </u>	0		0			0
(22)		_							0		o			0
(23)									0		0			
(24)			-			T		-			-			
(OF)			_		ļ	-		-	0		0			0
(25)		_												
1b	Sub-total							•	0	ļ	0			0
C	Total from continuation sheets to Parl			٠	•				0	 	0			0
$\frac{d}{2}$	Total (add lines 1b and 1c) Total number of individuals (including bu	t not limited					above	2) W	the received m	<u> </u>	<u> </u>	f		0
	reportable compensation from the organ			1030	, 113	100	abovi	-, vi	THO TOOCHCO III	ore than \$100,		, <u> </u>		
													Yes	No
3	Did the organization list any former of employee on line 1a? If "Yes," complete							emp	oloyee, or nigr 	nest compensa	itea	3		1
4	For any individual listed on line 1a, is the							on a	and other comp	pensation from	the			
	organization and related organizations	greater th	an \$	150	,000)? [f "Ye	s, "	complete Sci	nedule J for s	uch			
	ındıvıdual											4		1
5	Did any person listed on line 1a receive of for services rendered to the organization													,
Section	on B. Independent Contractors	: 11 163, (Jonip	icic	- JU	100	110 0		Such person	• •	<u>·</u>	5		✓
1	Complete this table for your five highest	compensat	ted in	dep	enc	lent	contr	act	ors that receiv	ed more than \$	100,0	000 of		
	compensation from the organization. Re year.	port compe	ensati	on f	or t	he d	calenc	iar :	year ending wi	th or within the	orga	nızatıc	n's ta	ЭX
	(A) Name and business ad	drace							(B) Description of s	services		(C)	ation	
	rearine and publicess add							-						
													_	
								-						
2	Total number of independent contract received more than \$100,000 of compen							o tl	hose listed ab	ove) who				

Part	VIII	Statement of Revenue					
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts nts	1a	Federated campaigns	1a				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b				
S, E	С	Fundraising events	1c				
a	d	Related organizations	1d				
iri	е	Government grants (contributions)	1e				
tior sr S	f	All other contributions, gifts, grants,					
ig #		and similar amounts not included above	1f 103292				
d of	g	Noncash contributions included in lines 1a-1					
	h	Total. Add lines 1a-1f	•	103292			
age	_		Business Code				
eve	2a	Activities Income	900099	2120		2120	
e.	b						
Ŋ	C						_
Se I	d			_			<u> </u>
ran	e	All other program convey revenue					
Program Service Revenue	f g	All other program service revenue Total. Add lines 2a–2f		2120			
_	3	Investment income (including of		2120			
				706			706
	4	Income from investment of tax-exem		,,,,			,,,,
	5	Royalties					
	_	(i) Real	(ii) Personal				
	6a	Gross rents .					
	b	Less rental expenses				_	
	С	Rental income or (loss)					
	d	Net rental income or (loss)	•	2100			2100
	7a	Gross amount from sales of (i) Securities	s (ii) Other				
		assets other than inventory		u.			
	b	Less cost or other basis					
		and sales expenses .					
	C	Gain or (loss) .					
	d	Net gain or (loss)	. <u> </u>			_	
<u>o</u>	8a	Gross income from fundraising					
enne	Oa	events (not including \$					
		of contributions reported on line 1c	;				
7		See Part IV, line 18					
Other Re	ь	Less: direct expenses .	b				
O		Net income or (loss) from fundrais					
		Gross income from gaming activiti					
		See Part IV, line 19	а				
	b	Less direct expenses	b				
	С	Net income or (loss) from gaming					
	10a	Gross sales of inventory, le	ess				
			a				
	b	Less: cost of goods sold	, p				
	c_	Net income or (loss) from sales o		-		_	
		Miscellaneous Revenue	Business Code			-	
	11a	Service Fees from Affiliates	524298	135906	_	135906	
	b					· -	
	l d	All other revenue		 		· . -	
	e	All other revenue		135906			
	12	Total revenue. See instructions		244124		138026	2806

Part IX Statement of Functional Expenses

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).

	Check if Schedule O contains a respon-	se to any question	in this Part IX .	<u> </u>	<u> </u>
	t include amounts reported on lines 6b, 7b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
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 8	Other salaries and wages	123877			
9	Other employee benefits	<u> </u>			
10	Payroll taxes	9928			
11	Fees for services (non-employees):			-	
a	Management				
b	Legal				
	•				
C	Accounting				
d	Lobbying				<u> </u>
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses	16453			
14	Information technology				
15	Royalties				
16	Occupancy	31080			
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	10576	· · · · · · · · · · · · · · · · · · ·		
20	Interest				
21	Payments to affiliates	35721			
22	Depreciation, depletion, and amortization .				
23	Insurance				
24	Other expenses, Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24e. If			1	
	line 24e amount exceeds 10% of line 25, column			1	
	(A) amount, list line 24e expenses on Schedule O.)			İ	
а					
b					
c					<u> </u>
d					
e	All other expenses Miscellaneous	360			
25	Total functional expenses. Add lines 1 through 24e	227995			
26	Joint costs. Complete this line only if the	22,333			
20	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here				
	following ŠOP 98-2 (ASC 958-720)				

Pa	art X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	1473	1	16896
	2	Savings and temporary cash investments	68815	2	69520
	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	j		
		Schedule L		5	
s	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
Assets	7	Notes and loans receivable, net		7	
Ąŝ	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or			
		other basis. Complete Part VI of Schedule D 10a 377026			
	b	Less ⁻ accumulated depreciation 10b	371941		377026
	11	Investments—publicly traded securities		11	<u>.</u>
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments – program-related. See Part IV, line 11		13	
	14	Intangible assets		15	
	15	Other assets See Part IV, line 11	442229	16	463443
	16 17	Total assets. Add lines 1 through 15 (must equal line 34)	442223	17	703773
	18	Grants payable		18	
	19	Deferred revenue		19	<u> </u>
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
Ś	22	Payables to current and former officers, directors, trustees, key			
Liabilities		employees, highest compensated employees, and disqualified persons.			
æ		Complete Part II of Schedule L		22	
Ë	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 (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0	26	0
sec		Organizations that follow SFAS 117, check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.			
au	27	Unrestricted net assets		27	
Bal	28	Temporarily restricted net assets		28	
P	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here ▶ ✓ and complete lines 30 through 34.			
ts c	30	Capital stock or trust principal, or current funds		30	
SSe	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
ţ	32	Retained earnings, endowment, accumulated income, or other funds.	442229		463443
Net	33	Total net assets or fund balances	442229		463443
	34	Total liabilities and net assets/fund balances	442229	34_	463443
					Form 990 (2011

_	4	
Page		4

Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI	<u> </u>	<u> </u>		<u> </u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1_	_	24	14124
2	Total expenses (must equal Part IX, column (A), line 25)	2		22	27995
3	Revenue less expenses. Subtract line 2 from line 1	3	_	16129	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		442229	
5	Other changes in net assets or fund balances (explain in Schedule O)	5			5085
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33,				
	column (B))	6		46	3443
Part					_
	Check if Schedule O contains a response to any question in this Part XII		<u> </u>		ᆜ
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," ex	olain	in		
_	Schedule O.		. 2a		-; -
2a					√
b	Were the organization's financial statements audited by an independent accountant?				√ _
С					
	of the audit, review, or compilation of its financial statements and selection of an independent accounts.				
	If the organization changed either its oversight process or selection process during the tax year, ex Schedule O.	piain	in		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the yellissued on a separate basis, consolidated basis, or both:	ar wei	e		
	<u> </u>				
0-	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis As a result of a federal award, was the organization required to undergo an audit or audits as set	forth	_ -		
3a	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 under		- Cu	\vdash	
D	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3b		
	Toquilot addit of addito, explain why in contoduc o and describe any stops taken to undergo sacin a			m 990	(2011)
			For	33 0	(2011)

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Employer identification number Florence County Farm Bureau 57-0343186 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (b) Funds and other accounts Total number at end of year 1 Aggregate contributions to (during year) . 2 Aggregate grants from (during year) . . Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) ☐ Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. 2a a Total number of conservation easements . . . Number of conservation easements on a certified historic structure included in (a) . Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of ☐ Yes ☐ No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1 **b** Assets included in Form 990, Part X

Part	III Organizations Maintaining	Collections of	f Art, His	torical 1	reasures,	or Ot	her Similar As	sets (continued)
3	Using the organization's acquisition, collection items (check all that apply)	accession, and	other reco	rds, chec	k any of the	follov	ving that are a si	gnificant use of its
а	☐ Public exhibition		d	Loan	or exchange	prog	rams	
b	☐ Scholarly research		е	☐ Other	r •••••••			
С	☐ Preservation for future generations							
4	Provide a description of the organizat	tion's collections	s and expla	ain how t	hey further t	he org	janization's exem	pt purpose in Part
	XIV.							
5	During the year, did the organization							
	assets to be sold to raise funds rather							
Part		_		~	anızation a	nswe	red "Yes" to Fo	rm 990, Part IV,
	line 9, or reported an amoun							
1a	is the organization an agent, trustee, included on Form 990, Part X?			•				t Yes No
b	If "Yes," explain the arrangement in Pa	art XIV and com	plete the fo	ollowing t	able.			
							Ar	nount
С	Beginning balance					10	:	
ď	Additions during the year					10		
е	Distributions during the year					1e		
f	Ending balance					1f		
2a	Did the organization include an amoun	nt on Form 990,	Part X, line	217 .		. —		☐ Yes ☐ No
b	If "Yes," explain the arrangement in Pa	art XIV						
	V Endowment Funds. Comple		nization ar	nswered	"Yes" to Fo	orm 9	90, Part IV, line	10.
		(a) Current year	(b) Pri	or year	(c) Two years	back	(d) Three years back	(e) Four years back
1a	Beginning of year balance							
b	Contributions							
C	Net investment earnings, gains, and							
	losses							_
d	Grants or scholarships							
е	Other expenditures for facilities and							
	programs							
f	Administrative expenses							
g	End of year balance	•						
2	Provide the estimated percentage of t	he current year	end balanc	e (line 1g	, column (a))	held	as.	
а	Board designated or quasi-endowmer							
b		%						
С	Temporarily restricted endowment ▶	%	1					
	The percentages in lines 2a, 2b, and 2		100%.					
За	Are there endowment funds not in the	•		zation the	at are held a	nd ad	ministered for the	Э
	organization by.							Yes No
	(i) unrelated organizations						,	3a(i)
	(ii) related organizations							3a(ii)
b	If "Yes" to 3a(ii), are the related organ							3b
4	Describe in Part XIV the intended uses	s of the organiza	ation's end	owment f	unds.			<u> </u>
Part	VI Land, Buildings, and Equip	ment. See Fo	rm 990, P	art X, lin	e 10.			
	Description of property		other basis stment)		or other basis other)		Accumulated epreciation	(d) Book value
1a	Land				32306			32306
b	Buildings		_	ĺ	273135			273135
С	Leasehold improvements			Ī				
d	Equipment				71585			71585
_ е	Other							
Total.	Add lines 1a through 1e (Column (d) n	nust equal Form	990, Part .	X, columr	(B), line 10(c).)	. <u>.</u> . >	377026

Part VII Investments—Other Securities.	See Form 990. Part X	. line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of val	
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other		-	
(A)			
(B)		-	
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
(f)			·
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶			
Part VIII Investments—Program Related.			
(a) Description of investment type	(b) Book value	(c) Method of val Cost or end-of-year m	
(1)			
(2)			
(3)			
(4)			
(5)			
(6)		-	
(7)			
(8)			
(9)			
(10) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13) ▶			
Part IX Other Assets. See Form 990, Part	t X line 15		
	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, col		<u> ▶</u> }	
Part X Other Liabilities. See Form 990, I			
1. (a) Description of liability	(b) Book value	_	
(1) Federal income taxes		-	
(2)			
(4)		—	
(5)			
(6)			
(7)			
(8)	- "		
(9)	<u> </u>	_	
(10)		\dashv	
(11)		7	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶			
2. FIN 48 (ASC 740) Footnote. In Part XIV, provide t	he text of the footnote	to the organization's financial stater	ments that reports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements					
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		
	Excess or (deficit) for the year. Subtract line 2 from line 1		3		
3	· · · ·		4		
4	Net unrealized gains (losses) on investments		5		
5	Donated services and use of facilities		6		
6	Investment expenses		7		
7	Prior period adjustments		- +		
8	Other (Describe in Part XIV.)		8		
9	Total adjustments (net). Add lines 4 through 8		9		
10	Excess or (deficit) for the year per audited financial statements. Combine I		10		
	XII Reconciliation of Revenue per Audited Financial Stateme			ım	
1	Total revenue, gains, and other support per audited financial statements .		1		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	_ 1			
а	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	_2c			
d	Other (Describe in Part XIV.)	2d	<u> </u>	_	
е	Add lines 2a through 2d		2e	ļ	
3	Subtract line 2e from line 1		3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		i		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	_		
b	Other (Describe in Part XIV.)	4b		_	
С	Add lines 4a and 4b		4c		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1				
Part	XIII Reconciliation of Expenses per Audited Financial Statem		oer Re	eturn	
1	Total expenses and losses per audited financial statements		1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIV.)	2d	_]		
е	· · · · · · · · · · · · · · · · · · ·		2e		
3	Subtract line 2e from line 1		3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		[
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV.)	4b			
С	Add lines 4a and 4b		4c		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	918)	5		
Part			•		
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2, Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.					

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization	Employer identification number
Florence County Farm Bureau	57-0343186
Part III	
Line 4d - All Other Achievements	
Provide funds for agricultural education and promote agricultural interests.	
Provide funds for agricultural education and promote agricultural interests.	
Part VI	
Section A - Governing Body and Management	
Line 2 Rhett Bacot and Jimmy Bacot, Directors - Family Relationship	
Section B - Policies	
Line 11b - There is no current policy for the organization to review the Form 990.	
Line 1 b - There is no current policy for the organization to review the 1 orni 930.	
····	••••••
Section C - Disclosure	
Line 19 - No documents available to the public	
•	
Part XI	
Line 5 - Other Changes in Net Assets	
Audit adjustments \$ 5,085	
	•••••