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Form **990**

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

2012

Open to Public Inspection

A Fo	r the	2012 cal		01-01-2012 , 2012, and ending 12-	31-2012			
		applicable	C Name of organization VIRGINIA FARM BUREAU FEDERATION	V		D Emplo	yer ider	ntification number
	dress c	_	Doing Business As			<u> </u>	419002	2
_	me cha							
_	tıal retu		Number and street (or P O box if ma P O BOX 27552	all is not delivered to street address) Room/s	uite	E Teleph	one num	ber
	rmınate					(804)	290-1	000
		return	City or town, state or country, and Zi RICHMOND, VA 232617552	P + 4				
J Ap	plicatio	n pending			_		<u> </u>	5 15,246,527
			F Name and address of prince WAYNE FPRYOR	cipal officer		s this a group ffiliates?	return	for
			P O BOX 27552	2		illiaces.		1 1631 110
			RICHMOND, VA 23261755	2				ded? Tyes TNo
—— I Та	ıx-exer	npt status	501(c)(3)	nsert no)	- If	f "No," attach	n a list	(see instructions)
			WW VAFB COM		H(c)	Group exempt	tıon nur	mber 🟲
				_	1			
			Corporation Trust Association	Other -	L Year	of formation 19	926 M	State of legal domicile VA
Pa	rt I		nmary					
			lescribe the organization's mission CING THE AGRICULTURAL INT	n or most significant activities ERESTS OF MEMBERS THROUGH E	CONOMIC	. POLITICA	L & SO(CIAL PROGRAMS
e e			CING THE MORIEGET ORMETHY	ENESTS OF THEITBERS THROUGHE	001101110	,102111071		<u> </u>
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ਭੂ	2	Check tl	hıs box 🛏 ıf the organızatıon dıs	continued its operations or disposed	of more tha	an 25% of its	net as	sets
Governance	l _						1 - 1	
Activities &				ng body (Part VI, line 1a)			3	18
ĕ				f the governing body (Part VI, line 1b			4	17
톥				alendar year 2012 (Part V, line 2a)			5 6	136
ď				rt VIII, column (C), line 12			7a	746,220
	1			om Form 990-T, line 34			7b	311,897
	ا -	Tree dille	tracea basiness taxable mesme in	, , , , , , , , , , , , , , , , , , ,		· · · Prior Year	' '}'	Current Year
	8	Contri	ibutions and grants (Part VIII, lin	e 1 h)		i iioi i cui	0	0
ā	9		- · · · · · · · · · · · · · · · · · · ·	e 2g)		3,010,	293	2,961,667
Rayenue	10	_		(A), lines 3, 4, and 7d)		4,813,560		4,433,456
芒	11	Other	revenue (Part VIII, column (A), l	ines 5, 6d, 8c, 9c, 10c, and 11e)		1,965,	409	2,908,339
	12			(must equal Part VIII, column (A), lıı	ne 💮	0.700	262	10 202 462
	13		c and cimilar amounts noid (Dart 1	X, column (A), lines 1-3)		9,789, 208,		10,303,462
	14			(, column (A), line 4)		200,	002	160,803
	15		·	e benefits (Part IX, column (A), lines			\dashv	
\$	13	5-10		e benefits (Fare 1x, column (x), mes		6,225,	412	6,605,088
Expenses	16a	Profes	ssional fundraising fees (Part IX, o	column (A), line 11e)			0	0
ਡੌ	Ь	Total fu	undraising expenses (Part IX, column (D),	, line 25) 📭				
	17	Other	expenses (Part IX, column (A), lı	nes 11a-11d, 11f-24e)		3,508,	037	3,183,238
	18	Total	expenses Add lines 13-17 (mus	t equal Part IX, column (A), line 25)		9,941,		9,949,129
	19	Reven	nue less expenses Subtract line 1	8 from line 12		-152,		354,333
% & ₩ ₩ ₩					Begin	ning of Curre Year	nt	End of Year
10 m	20	Total	assets (Part X, line 16)			39,408,	278	40,446,665
Net Assets or Fund Balances	21		liabilities (Part X, line 26)			17,220,		17,257,195
žÏ	22		ssets or fund balances Subtract I	22,188,		23,189,470		
Pa	rt II	_	nature Block		 			
my k	nowle	dge and		mined this return, including accompa plete Declaration of preparer (other				
			***			2012 07 20		
Sigr	1	IB	ature of officer			2013-07-29 Date		
Her		way	'NE F PRYOR PRESIDENT					
		Туре	e or print name and title					
		F	Print/Type preparer's name	Preparer's signature	Date	Check If	PTIN	
Pai			Firm's name 🕨	<u> </u>		self-employed Firm's EIN ►	<u> </u>	
	pare	er						
Use	On	ıly ∣¹	Firm's address 🟲			Phone no		

May the IRS discuss this return with the preparer shown above? (see instructions)

┌Yes ┌No

## Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III	Page 2		Acception	t of Duogues Court	1990 (2012)	
WE WILL ENHANCE, PRIMARILY THROUGH ADVOCACY, EDUCATION AND COMMUNICATION, THE AGRICU ARM BUREAU MEMBERS THROUGH ECONOMIC, POLITICAL AND SOCIAL PROGRAMS 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 99 0 or 990-E2? 1f "Yes," describe these new services on Schedule O 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? 1f "Yes," describe these changes on Schedule O 4 Describe the organization's program service accomplishments for each of its three largest program services, expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allot the total expenses, and revenue, if any, for each program service reported 4a (Code) (Expenses \$ including grants of \$) (Revenue \$ A MAGAZINE FOR RASSOCIATE MEM PUBLISHED FOUR TIMES A YEAR THE PURPOSE OF THE FARM BUREAU NEWS IS TO KEEP PRODUCER MEMBERS (FARMERS) ARREAM AGRICULTURAL ISSUES AND PROVIDE THEM WITH FOUGHTONAL MATERIALS THE PURPOSE OF CULTIVARIES) AND PROVIDE THEM WITH FOUGHTONAL MATERIALS THE PURPOSE OF CULTIVARIES OF PROPROUCES AND ARRS WEEKLY COOVERNMENT ACCESS, NETWORK AFFILIATE STATIONS AND THE DISH AND DIRECT TV SATELLITE NETWORKS THE PURPOSE IS TO AGRICULTURE 4b (Code) (Expenses \$ including grants of \$) (Revenue \$ PROPONTIONAL SUPPORT IS PROVIDED TO COUNTY FARM BUREAUS THROUGH THE COUNTY NEWSLETTER PROGRAM, AS WELL AS THE PROMOTIONAL SUPPORT IS PROVIDED TO COUNTY FARM BUREAUS THROUGH THE STATE AND FEDERAL LEGISLATIVE PROCESS THRE PROMOTIONAL TECHNIQUES SUCH AS WEB SITES AND PUBLIC RELATIONS ENTERS TO THE STATE AND FEDERAL LEGISLATIVE PROCESS THRE PROMOTIONAL TECHNIQUES SUCH AS WEB SITES AND PUBLIC RELATIONS FOR THE STATE AND FEDERAL LEGISLATIVE PROCESS THRE PROMOTIONAL TECHNIQUES SUCH AS WEB SITES AND PUBLIC RELATIONS FOR THE STATE AND FEDERAL LEGISLATIVE PROCESS THRE PROMOTIONAL TECHNIQUES SUCH AS WEB SITES AND PUBLIC RELATIONS FOR THE STATE AND FEDERAL LEGISLATIVE PROCESS TH	٦					Pari
2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 99 or 990-E27				e organization's mission	Briefly describe the	1
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4e Total program service expenses ►	1	, (Nevenue 4	3. 4			

Part IV	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		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
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		No
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</i> "Yes," complete Schedule C, Part II	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	Yes	
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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
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		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	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		No
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		No
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? If "Yes," complete Schedule D, Part IX	11d	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X^{\bullet}	11e	Yes	
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	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
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 and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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		No
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		No
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		No
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		No
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		No
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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
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	Yes	
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		No
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	Yes	
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		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	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	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, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
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		No
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			1
		28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Νo
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		No
29	Did the organization receive more than $\$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		Νo
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		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, 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		No
36	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		
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

(:	Statements Regarding Other 1RS Fillings 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 1a 179			110
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Yes	
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			
L	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
D	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
la	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		Νo
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			
ā	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	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		
	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?	7 c		
a	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
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		
3	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.			
	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		
)	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
L	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
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			
С	Enter the amount of reserves on hand			
a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
h	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b		No
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ıe Cod	e.)
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	<i>je Cod</i> Yes	e.) No
	Did the organization have local chapters, branches, or affiliates?	even:		
10a			Yes	
10a b	Did the organization have local chapters, branches, or affiliates?	10a	Yes Yes	
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes Yes Yes	
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes Yes Yes	
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes Yes Yes	
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a	Yes Yes Yes Yes	
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes Yes Yes	
110a b 111a b 12a b c	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10a 10b 11a 12a 12b	Yes Yes Yes Yes Yes Yes	
110a b 111a b 112a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes Yes	
10a b 11a b 12a b c 13 14	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes Yes	
10a b 11a b 12a b c 13 14	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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?	10a 10b 11a 12a 12b 12c 13 14	Yes	
10a b 11a b 12a b c 13 14	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13 14	Yes	
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	10a 10b 11a 12a 12b 12c 13 14	Yes	
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes	No

- 17 List the States with which a copy of this Form 990 is required to be filed ► VA
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection Indicate how you made these available Check all that apply
 - Own website Another's website Vpon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►DAVID PRIDDY 12580 WEST CREEK PARKWAY RICHMOND, VA (804) 290-1000

Part VIII 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, or 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 nor any related organization compensated any current officer, director, or trustee

(A)	(B)			(C)			(D)	(E)	(F)
Name and Title	A verage hours per week (list any hours	more pers	than on is	(do one bot	not box h ar	check (, unle n office rustee	ss er	Reportable compensation from the organization	Reportable compensation from related organizations	Estimated amount of other compensation
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
(1) WAYNE F PRYOR PRESIDENT	40 00	x		x				256,764	0	24,997
(2) SCOTT E SINK	2 00	х		х				3,051	0	0
VICE PRESIDENT (3) NATHAN A AKER	2 00									
DIRECTOR		×						3,551	0	0
(4) JANICE R BURTON DIRECTOR	2 00	x						7,927	0	8,872
(5) EMILY F EDMONDSON	2 00	х						13,738	0	2,417
DIRECTOR (6) MARVIN L EVERETT JR	2 00	x						282	0	16,745
DIRECTOR (7) THOMAS E GRAVES JR	2 00	_ ^ 				\vdash		202		
DIRECTOR		х						11,271	0	4,794
(8) DAVID L HICKMAN DIRECTOR	2 00	×						12,726	0	2,541
(9) EVELYN H JANNEY	2 00	×						28,862	0	0
DIRECTOR (10) JORDAN M JENKINS JR	2 00							20,002		
DIRECTOR		х						141	0	18,828
(11) GORDON R METZ JR	2 00	х						10,748	0	6,157
DIRECTOR (12) ROBERT J MILLS JR	2 00							14,834	-	0
DIRECTOR (13) STEPHEN L SAUFLEY	2 00	×			_			14,634	0	0
DIRECTOR		Х						13,468	0	2,675
(14) RICHARD L SUTHERLAND	2 00	х						3,051	0	0
DIRECTOR (15) H CARL TINDER SR	2 00	x						14,934	0	0
DIRECTOR (16) PETER A TRUBAN	2 00									
DIRECTOR		Х						4,607	0	12,400
(17) WILLIAM E WALTON DIRECTOR	2 00	x						9,978	0	5,960
DIRECTOR		<u> </u>								Form 990 (2012)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) A verage hours per week (list any hours for related	more pers	than on is	one bot rect	note bo tha	chec x, unle n offic rustee	ess er e)	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	amou comp fro	(F) timated nt of other pensation om the
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099-	and	inization related nizations
` '	HENRY E WOOD JR	2 00	×						282		0	17,951
DIREC	CTOR ONATHAN S SHOUSE	40 00			<u> </u>	-	-	-				
` '	ETARY	40 00			×				121,090		0	15,346
	EFFREY W DILLON	4 00			\vdash	+	1					
TREAS	SURER				×				0		0	(
` '	DAVID A PRIDDY	4 00			х				0		0	(
	TREASURER PEGGY L MCCLELLAND	4 00					-					
	TREASURER				×				0		0	(
	CLAY FRANCIS	40 00										
HIGHI	EST COMPENSATED EMPLOY						×		136,230		0	15,617
(24)	MARTHA A MOORE	40 00					х		123,816		0	17,784
HIGH	EST COMPENSATED EMPLOY						<u> </u>		123,810		<u> </u>	17,76-
(25)	GREGORY K HICKS	40 00					l x		120,222		0	7,833
	EST COMPENSATED EMPLOY	10.00	<u> </u>				-					
	ALBERT K GLASS	40 00					x		109,351		0	9,415
	EST COMPENSATED EMPLOY ARCHIE B ATWELL	0 00					1					
FORM	ER DIRECTOR							X	11,347		0	2,341
	ROBERT C HARRIS	0 00						.	44.700			
FORM	ER DIRECTOR							X	11,798		0	1,375
(29)	EDWARD A SCHARER	0 00						x	141		0	16,721
FORM	ER OFFICER/DIRECTOR							<u> ^</u>				10,723
1b	Sub-Total						<u> </u> ▶					
c	Total from continuation sheets to Part						▶ ⊢					
d	Total (add lines 1b and 1c)	•					▶		1,044,210	0		210,769
2	Total number of individuals (including t \$100,000 of reportable compensation				ed a	bov	e) who	rec	eived more than			
											Ye	s No
3	Did the organization list any former off on line 1a? <i>If</i> "Yes," complete Schedule.										3 Yes	
4	For any individual listed on line 1a, is toganization and related organizations	he sum of repor	table c	ompe	ensa	atıor	n and o	othe	r compensation fr		, res	
	ındıvıdual						•	•		[/	4 Yes	5
5	Did any person listed on line 1a receiv services rendered to the organization?									i i	5	No
											•	•
Se	ection B. Independent Contract	ors										

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
MATSON CONSULTING P O BOX 661 AIKEN SC 29802	CONSULTING	158,891
COLONIAL WEBB CONTRACTORS CO 2820 ACKLEY AVENUE RICHMOND VA 23228	BUILDING MAINTENANCE	141,635
BARNARD TRUCKING P O BOX 216 AMELIA VA 23002	HAULING GRAIN	133,747
LEWIS MEDIA 500 LIBBIE AVENUE STE 2-C RICHMOND VA 23226	ADVERTISING	115,357
ROBERT W SCHULTZ P O BOX 260 WAVERLY VA 23890	HAULING GRAIN	110,844

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►5

Part V		Statement of Revenue					raye 3
rart V		Check if Schedule O contains a respo	nse to any question	ın thıs Part VIII .	<u> </u>	<u></u> .	<u></u>
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
	1a	Federated campaigns 1a					
Grants	ь	Membership dues 1b					
Gr.	С	Fundraising events 1c					
Contributions, Giffs, and Other Similar	_						
<u>ia</u>	d	Related organizations 1d					
ns.	е	Government grants (contributions) 1e					
를 있니	f	All other contributions, gifts, grants, and similar amounts not included above					
혈	а	Noncash contributions included in lines	i				
a C	9	1a-1f \$					
S a	h	Total. Add lines 1a-1f	· · · · •				
œ.			Business Code				
eun	2a	MEMBERSHIP DUES	110000	2,961,667	2,961,667		
Es Es	b						
Program Service Revenue	c						
	d						
	е						
Gra	f	All other program service revenue					
£	q	Total. Add lines 2a-2f		2,961,667			
	3	Investment income (including dividen					
		and other similar amounts)	🟲	4,142,582			4,142,582
	4	Income from investment of tax-exempt bond	proceeds 🕨				
	5	Royalties		2,056,279			2,056,279
	6 -	(I) Real Gross rents 1,145,590	(II) Personal				
	6a h	Gross rents 1,145,590 Less rental 460,955					
		expenses					
	С	Rental income 684,635 or (loss)					
	d	Net rental income or (loss)		684,635		684,635	
		(i) Securities	(II) Other				
	7a	Gross amount from sales of 4,772,984					
		assets other than inventory					
	b	Less cost or other basis and 4,482,110					
	_	sales expenses Gain or (loss) 290,874					
	c d	Net gain or (loss)		290,874			290,874
	u 8a	Gross income from fundraising		250,07.			230,07
e e		events (not including					
표		\$ of contributions reported on line 1c)					
ě.		See Part IV, line 18					
<u>.</u>		а					
Other Revenue	b	Less direct expenses b					
9	C	Net income or (loss) from fundraising	events 🛌				
	9a	Gross income from gaming activities See Part IV, line 19					
		a					
	b	Less direct expenses b					
	С	Net income or (loss) from gaming acti	vities				
	10a	Gross sales of inventory, less returns and allowances .					
		returns and allowances .					
	ь	Less cost of goods sold b					
		Net income or (loss) from sales of inv	entory 🛌				
}		Miscellaneous Revenue	Business Code				
	11a	MISCELLANEOUS	110000	105,840			105,840
	b	ADVERTISING INCOME	541800	61,585		61,585	
	С						
	d	All other revenue					
	e	Total. Add lines 11a-11d	🕨	167,425			
	12	Total revenue. See Instructions .	🕨	·	_		
			7	10,303,462	2,961,667	746,220	6,595,575

	Statement of Functional Expenses				
ectio	on 501(c)(3) and 501(c)(4) organizations must complete all columns All		·		
	Check if Schedule O contains a response to any question in this Pa	rt IX			· · · · · · · · · · · · · · · · · · ·
	ot include amounts reported on lines 6b, o, 9b, 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	160,803			
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	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	593,056			
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	4,780,822			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	397,289			
9	Other employee benefits	558,027			
L O	Payroll taxes	275,894			
.1	Fees for services (non-employees)				
а	Management				
b	Legal	21,348			
С	Accounting	35,629			
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
2	Advertising and promotion	173,157			
	Office expenses	445,839			
4	Information technology	210,420			
5	Royalties	210,420			
5	Occupancy	397,563			
7	Travel	· ·			
	Payments of travel or entertainment expenses for any federal,	422,715			
8	state, or local public officials	4,589			
9	Conferences, conventions, and meetings	374,931			
0	Interest	7			
1	Payments to affiliates	587,240			
2	Depreciation, depletion, and amortization	193,744			
3	Insurance	21,266			
4	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	STATE & FEDERAL INCOME	122,732			
b	DIRECTORS' EXPENSES	83,182			
c	PROPERTY & OTHER TAXES	26,617			
d	RADIO AND RECORDING	19,820			
e	All other expenses	42,439			
5	Total functional expenses. Add lines 1 through 24e	9,949,129			
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Par	t X	Balance Sheet Check if Schedule O contains a response to any question in this Part X			
		eneck in Senedate & contains a response to any question in this rate X	(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	1,244,013	1	537,975
	2	Savings and temporary cash investments	2,298,793	2	2,535,881
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	1,035,750	4	395,985
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
ø.	6	Loans and other 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) Complete Part II of Schedule L		_	
ळू				6	
Assets	7	Notes and loans receivable, net		7	
•	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	95,686	9	74,916
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 1,943,531	4		
	b	Less accumulated depreciation	563,534	10c	456,875
	11	Investments—publicly traded securities	16,272,294	11	15,985,967
	12	Investments—other securities See Part IV, line 11	1,585,718	12	1,801,146
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	16,312,490	15	18,657,920
	16	Total assets. Add lines 1 through 15 (must equal line 34)	39,408,278	16	40,446,665
	17	Accounts payable and accrued expenses	3,734,903	17	2,956,309
	18	Grants payable		18	
	19	Deferred revenue	1,531,023	19	1,406,797
	20	Tax-exempt bond liabilities		20	
Ø	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key 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	10,082,122	23	9,267,783
	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	4.070.044		0.000.000
		D	1,872,214	25	3,626,306
	26	Total liabilities. Add lines 17 through 25	17,220,262	26	17,257,195
Φ S		Organizations that follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 27 through 29, and lines 33 and 34.			
Š	27	Unrestricted net assets		27	
<u>8</u>	28	Temporarily restricted net assets		28	_
— —	29	Permanently restricted net assets		29	
or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ▽ and			
ō	30	complete lines 30 through 34.	11,306,497	20	11,391,840
ets	30	Capital stock or trust principal, or current funds	10,874,619	30 31	11,790,724
Assets	31	Patagon or capital surplus, or land, building or equipment fund	6,900	32	6,906
¥.	32 33	Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances	22,188,016	33	23,189,470
Net					
	34	Total liabilities and net assets/fund balances	39,408,278	34	40,446,665

Pai	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				৮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		10,3	303,462
2	Total expenses (must equal Part IX, column (A), line 25)	2		9,9	949,129
3	Revenue less expenses Subtract line 2 from line 1	3			354,333
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) \cdot .	4			
5	Net unrealized gains (losses) on investments	5			738,781
6	Donated services and use of facilities	6			30,701
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			-91,660
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10			189,470
Par	rt XII Financial Statements and Reporting				,
	Check if Schedule O contains a response to any question in this Part XII				. ᅜ
				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," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revia separate basis, consolidated basis, or both	ewed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep basis, consolidated basis, or both	arate			
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ın			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in t Single Audit Act and OMB Circular A-133?	ne	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b		

DLN: 93493210000353

OMB No 1545-0047

Inspection

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Political Campaign and Lobbying Activities

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

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

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

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

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** VIRGINIA FARM BUREAU FEDERATION 54-0419002 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes 3 Was a correction made? ☐ Yes □ No If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 4 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV **(c)** EIN (e) A mount of political (a) Name (b) Address (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none, enter-0-

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Sch	nedule C (Form 990 or 990-EZ) 2012					Page 2
Pa	art II-A Complete if the organization	is exempt under	section 501(c)(3) and fil	ed Form 5768	(election
_	under section 501(h)). Check ► if the filing organization belongs to a	an affiliated group (and	lict in Part IV os	ach affiliated are	un mambar's nam	o addross EIN
	expenses, and share of excess lobb	ying expenditures)		_	up member s nam	e, address, LTN
<u>B</u>	Check Frifthe filing organization checked box	x A and "limited contro	ıl" provisions apı	oly		
	Limits on Lobbying E (The term "expenditures" means an		l .)		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pınıon (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobb	yıng)			
c	Total lobbying expenditures (add lines 1a and 1b	o)				
d	O ther exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1c	c and 1d)				
f	Lobbying nontaxable amount Enter the amount fo	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
	Not over \$500,000	20% of the amount on li	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	0,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,	.000		
	Over \$17,000,000	\$1,000,000				
	Grassroots nontaxable amount (enter 25% of lin	e 1f)				
_	Subtract line 1g from line 1a If zero or less, ente	•		-		
i	Subtract line 1f from line 1c If zero or less, ente			-		
_	If there is an amount other than zero on either lin		organization file	Form 4720 rep	ortina	1
-	section 4911 tax for this year?					┌ Yes ┌ No
_	4-Voor Av	veraging Period U	Inder Section	F01/b)		
	(Some organizations that made a scolumns below. See the	section 501(h) el	ection do not	have to cor		ne five
	Lobbying Expe	enditures During	4-Year Avera	ging Period		1
	Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontavable amount					

Identifier

Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has filed Form 5768 (election under section 501(h)).	NOT			r age e
For a	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(z	1)	(b)	
activ	, , , , , , , , , , , , , , , , , , , ,	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
С	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	O ther activities?				
j	Total Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
Ь	If "Yes," enter the amount of any tax incurred under section 4912		L		
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c))(5), o	r sect	ion
			_	Ye	
1	Were substantially all (90% or more) dues received nondeductible by members?		_	1 Y e	_
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		_	2	No
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3	No
	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'Iine 3, is answered "Yes."	`No" C)(5), o)R (b) I	r sect Part I	ion II-A,
1	Dues, assessments and similar amounts from members	1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				
а	Current year	2a			
b	Carryover from last year	2b			
С	Total	2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	5			
	art IV Supplemental Information				

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list),

Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

Return Reference

Schedule C (Form 990 or 990EZ) 2012

Explanation

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493210000353

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

► 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.

Supplemental Financial Statements

Open to Public Inspection

Uniul	TOTAL SOLVICE F ALL ACTI TO FOIL	il 990. F See separate ilistructions.		Zilopeetion
	ne of the organization GINIA FARM BUREAU FEDERATION			oloyer identification number
Pa	rt I Organizations Maintaining Donor Adv organization answered "Yes" to Form 990			
		(a) Donor advised funds		(b) Funds and other accounts
L	Total number at end of year			
!	Aggregate contributions to (during year)			
	Aggregate grants from (during year)			
	Aggregate value at end of year			
	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or	_	or adv	rsed Yes No
•	Did the organization inform all grantees, donors, and do used only for charitable purposes and not for the beneft conferring impermissible private benefit?			
aı	t II Conservation Easements. Complete if	the organization answered "Yes" t	o Forn	n 990, Part IV, line 7.
	Purpose(s) of conservation easements held by the organization of land for public use (e.g., recreation) Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a	or education) Preservation of an Preservation of a	certifie	d historic structure
	easement on the last day of the tax year	ı		T
				Held at the End of the Year
a	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
:	Number of conservation easements on a certified histo	` '	2c	
i	Number of conservation easements included in (c) acq historic structure listed in the National Register		2d	
	Number of conservation easements modified, transferr	ed, released, extinguished, or terminate	ed by th	ne organization during
	the tax year ►			
	Number of states where property subject to conservati	on easement is located ►		
	Does the organization have a written policy regarding tenforcement of the conservation easements it holds?	he periodic monitoring, inspection, hand	dling of	f violations, and Yes No
	Staff and volunteer hours devoted to monitoring, inspec	cting, and enforcing conservation easer	ments o	during the year
	A mount of expenses incurred in monitoring, inspecting	, and enforcing conservation easement	s durın	g the year
	Does each conservation easement reported on line 2(c and section 170(h)(4)(B)(II)?	d) above satisfy the requirements of sec	tion 1	70(h)(4)(B)(ı) Yes No
	In Part XIII, describe how the organization reports corbalance sheet, and include, if applicable, the text of the organization's accounting for conservation easeme	e footnote to the organization's financia		nse statement, and
ar	Organizations Maintaining Collection Complete if the organization answered "Y	s of Art, Historical Treasures,	or Ot	her Similar Assets.
а	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide, in Part XIII, the text of the footnote t	16 (ASC 958), not to report in its reve ts held for public exhibition, education,	or rese	earch in furtherance of public
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide the following amounts relating to these	16 (ASC 958), to report in its revenue ts held for public exhibition, education,	statem	nent and balance sheet
	(i) Revenues included in Form 990, Part VIII, line 1			▶ \$
	(ii) Assets included in Form 990, Part X			► \$
	If the organization received or held works of art, historic following amounts required to be reported under SFAS			· · · · · · · · · · · · · · · · · · ·
3	Revenues included in Form 990, Part VIII, line 1			▶ \$
b	Assets included in Form 990, Part X			· · · · · · · · · · · · · · · · · · ·
-	A 3 3 ELS III CIUUEU III FUIIII 770, Pail A			F P

Part	111 Organizations Maintaining Co	llections of Art	<u>, His</u>	<u>tori</u>	<u>cal Tre</u>	<u>easu</u> i	res, or O	<u>the</u>	<u>r Similar Ass</u>	ets (co	ontinued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other recor	ds, ch	neck	any of th	ne follo	wing that a	re a	significant use c	of its	
а	Public exhibition		d	Γ	Loan o	rexch	ange progr	ams			
b	Scholarly research		e	Γ	Other						
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	ın hov	w the	y furthe	r the o	rganızatıon	's ex	empt purpose ın		
5	During the year, did the organization solicit	or receive donations	ofar	t, hıs	torical t	reasui	es or other	sım			
	assets to be sold to raise funds rather than t								<u> </u>	Yes	│ No
Par	Part IV, line 9, or reported an an						answered	1 "Y	es" to Form 99 	0,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	lian or other interme	ediary	forc	ontribut	ions o	r other ass	ets r		Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follov	wing t	able		_				
							F		Amo	ount	
С	Beginning balance						L	1c			
d	Additions during the year							1d			
е	Distributions during the year						⊢	1e			
f	Ending balance						L	1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	e 21?	•					Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	anatio	n has b	een pr	ovided in P	art X	III		Γ
Pa	rt V Endowment Funds. Complete										
		(a)Current year	(b) Prior	year	b (c) Tw	o years back	(d) ¹	hree years back (e) Four y	ears back
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
e	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curi	rent year end baland	ce (lın	ne 1g	, columr	n (a)) h	eld as				
а	Board designated or quasi-endowment 🕨										
ь	Permanent endowment -										
С	Temporarily restricted endowment ►										
	The percentages in lines 2a, 2b, and 2c show	uld equal 100%									
За	Are there endowment funds not in the posses organization by		ation	that	are held	and a	dmınıstered	l for	the	Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)	
	If "Yes" to 3a(II), are the related organizatio								3b		
4	Describe in Part XIII the intended uses of th										
Par	t VI Land, Buildings, and Equipme Description of property	ent. See Form 99	0, Pa	_	<u>, line 1</u>) Cost or		(b)Cost or o	ther	(c) Accumulated	(d) B	ook value
	Description of property				sis (invest		basis (othe		depreciation	(4,5	
	Land		•								
b	Buildings									4	
C	Leasehold improvements										
	Equipment		•	<u></u>							
	Other					76,653	1,666	•		5	456,875
Tota	l. Add lines 1a through 1e <i>(Column (d) must e</i>	qual Form 990, Part 🛚	X, colu	ımn (B), line 1	10(c).)			🕨		456,875

Part VII Investments—Other Securities. S	See Form 990, Part X, line 12.	
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
Other		
	+	
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 valuation
		Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	F	
Part IX Other Assets. See Form 990, Part X	(, line 15.	
	scription	(b) Book value
(1) DEFERRED LOAN COSTS		28,619
(2) NET INVESTMENT IN DIRECT FINANCING LEAS	F	13,528,131
	_	
(3) DUE FROM AFFILIATES		5,101,170
Total. (Column (b) must equal Form 990, Part X, col.(B) lin	e 15.)	
Part X Other Liabilities. See Form 990, Pa		10,007,520
(-) December of behilder	(b) Book value	
	(B) Book value	
Federal income taxes		
ACCRUED POST RETIREMENT BENEFITS	2,391,231	
DEFERRED COMPENSATION PAYABLE	912,051	
DUES PAYABLE	323,024	
	·	
]	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	▶ 3.626.306	
Total. (Column (b) must equal room 350, Part X, col (b) line 25)	▶ 3,626,306	

Par	Reconciliation of Revenue per Audited Financial Statements With Revenue	per Re	eturn
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		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII) 2d		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
ь	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	
Part	Reconciliation of Expenses per Audited Financial Statements With Expense	s per	Return
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		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII).............. 2d	_	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	A mounts 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 XIII).............. 4b	_	
С	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	

Part XIII Supplemental Information

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, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

I dentifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN FAX POSITIONS UNDER FIN 48	PART X, LINE 2	THE COMPANY ADOPTED THE FINANCIAL ACCOUNTING STANDARDS BOARD'S (FASB) AUTHORITATIVE GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES AS OF JANUARY 1, 2009 THE COMPANY ANALYZED FILING POSITIONS IN ALL OF THE FEDERAL AND STATE JURISDICTIONS WHERE IT IS REQUIRED TO FILE INCOME TAX RETURNS, AS WELL AS ALL OPEN TAX YEARS IN THEST JURISDICTIONS THE PERIODS SUBJECT TO EXAMINATION FOR THE COMPANY'S FEDERAL AND STATE RETURNS ARE THE 2009, 2010, 2011 AND 2012 TAX YEARS THE COMPANY DID NOT HAVE ANY UNCERTAIN TAX BENEFITS AND THERE WAS NO EFFECT ON THE COMPANY'S FINANCIAL CONDITION OR RESULTS OF OPERATIONS AS A RESULT OF IMPLEMENTING THE AUTHORITATIVE GUIDANCE IT IS THE COMPANY'S POLICY TO RECOGNIZE INTEREST AND PENALTIES ACCRUED ON ANY UNCERTAIN TAX BENEFITS AS A COMPONENT OF INCOME TAX EXPENSE AS OF THE DATE OF ADOPTION OF THE FASB'S AUTHORITATIVE GUIDANCE ON ACCOUNTING FOR UNCERTAIN TAX POSITIONS AND AS OF DECEMBER 31, 2012, THE COMPANY DID NOT HAVE ACCRUED INTEREST OR PENALTIES ASSOCIATED WITH ANY UNCERTAIN TAX BENEFITS, NOR WAS ANY INTEREST EXPENSE RECOGNIZED DURING THE YEAR ENDED DECEMBER 31, 2012

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Schedule I (Form 990)

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

DLN: 93493210000353 OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. ► Attach to Form 990

Employer identification number

VIRGINIA FARM BUREAU FED 						54-0419002	
1 Does the organization main the selection criteria used 2 Describe in Part IV the organization.	to award the grants	tantiate the amount of th					∀ Yes
		Governments and received					"Yes" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) VIRGINIA FFA FOUNDATION 1660 LITTON REAVES BLACKSBURG,VA 24061	54-1291124	501(C)(3)	5,000		,		GENERAL SUPPORT
(2) VIRGINIA TECH FOUNDATION 902 PRICES FORK ROAD BLACKSBURG, VA 24061	54-0721690	501(C)(3)	7,780				GENERAL SUPPORT
(3) VARIOUS OTHER CHARITABLE CONTRIBUTIONS			18,842				GENERAL SUPPORT
2 Enter total number of sect	non 501(c)(3) and go	vernment organizations li	sted in the line 1 table				2

Enter total number of other organizations listed in the line 1 table

(b) Number of recipients	(c) A mount of cash grant	(d) A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
I	I	1		
				recipients cash grant non-cash assistance (book,

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier Return Reference Explanation

Schedule I (Form 990) 2012

DLN: 93493210000353

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990, Part IV, question 23. ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization VIRGINIA FARM BUREAU FEDERATION **Employer identification number**

54-0419002

Pai	rt I Questions Regarding Compensa	tion				
					Yes	No
1a	• • • • • • • • • •	•	ny of the following to or for a person listed in Form ride any relevant information regarding these items			
	First-class or charter travel	Γ	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Г	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the reimbursement or provision of all of the expense			1b		
2	Did the organization require substantiation prior directors, trustees, and the CEO/Executive Directors		sing or allowing expenses incurred by all officers, ding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing or organization's CEO/Executive Director Check a used by a related organization to establish comp	all that apply				
	∇ Compensation committee	Γ	Written employment contract			
	☐ Independent compensation consultant	া	Compensation survey or study			
	Form 990 of other organizations	⊽	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 99 or a related organization	90, Part VII	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-con	ntrol paymen	it?	4a		No
b	Participate in, or receive payment from, a supple	emental non	qualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equit	ty-based co	mpensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons an	nd provide th	ne applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only	y must comp	olete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section compensation contingent on the revenues of	on A, line 1a	, did the organization pay or accrue any			
а	The organization?			5a		
b	Any related organization?			5b		
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section compensation contingent on the net earnings of		, did the organization pay or accrue any			
а	The organization?			6a		
ь	Any related organization?			6b		
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section payments not described in lines 5 and 67 If "Ye			7		
8	Were any amounts reported in Form 990, Part V subject to the initial contract exception describe		occured pursuant to a contract that was atlants at the section 53 4958-4(a)(3)? If "Yes," describe			
	in Part III			8		
9	If "Yes" to line 8, did the organization also follow section 53 4958-6(c)?	w the rebutta	able presumption procedure described in Regulations	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown o	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990
(1)WAYNE F PRYOR PRESIDENT	(i) (ii)	240,701 0	10,681	5,382 0	16,465 0	8,532 0	281,761 0	0
(2) J CLAY FRANCIS HIGHEST COMPENSATED EMPLOY	(i) (ii)	132,357 0	2,810 0	1,063	7,474 0	8,143 0	151,847 0	0
(3)ARCHIE B ATWELL FORMER DIRECTOR	(i) (ii)	11,347 0	0	0	2,341 0	0	13,688 0	0
(4)ROBERT C HARRIS FORMER DIRECTOR	(i) (ii)	11,798 0	0	0	1,375 0	0	13,173 0	0
(5)EDWARD A SCHARER FORMER OFFICER/DIRECTOR	(i) (ii)	141 0	0	0	16,721 0	0	16,862 0	0

Schedule J (Form 990) 2012

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

Also complete this part for any	so complete this part for any additional information				
Identifier	Return Reference	Explanation			
	PART I, LINE 3	THE OFFICE OF PRESIDENT OF THE VIRGINIA FARM BUREAU FEDERATION IS AN ELECTED POSITION PERIODICALLY, HUMAN RESOURCES SENDS THE BUDGET AND AUDIT COMMITTEE THE PRESIDENT'S CURRENT SALARY, THE SALARY RANGE OF THE POSITION, AND THE AVERAGE SUGGESTED INCREASE PERCENTAGE FOR EXECUTIVES BASED ON SALARY SURVEY DATA THE SALARY IS REVIEWED AND THE INCREASE IS RECOMMENDED BY THE COMPANY'S BUDGET AND AUDIT COMMITTEE WHICH IS MADE UP OF THREE OF THE EIGHTEEN BOARD OF DIRECTORS THE BOARD OF DIRECTORS REVIEWS AND APPROVES THE RECOMMENDATION OF THE BUDGET AND AUDIT COMMITTEE THIS PROCESS IS REVIEWED DURING THE EXECUTIVE SESSION OF THE BOARD OF DIRECTORS THE SECRETARY OF THE COMPANY HAS RECORDED MINUTES OF THE SALARY APPROVAL THIS IS AN ANNUAL PROCESS WHICH OCCURS DURING THE FIRST QUARTER OF THE YEAR FOLLOWING AND THE SALARY IS EFFECTIVE JANUARY 1 OF THE FOLLOWING YEAR			
	PART I, LINE 4B	WAYNE F PRYOR \$17,000 JANICE BURTON \$7,241 EMILY F EDMONDSON \$1,570 MARVIN L EVERETT \$15,027 THOMAS E GRAVES, JR \$3,850 DAVID L HICKMAN \$1,458 EVELYN JANNEY \$11,920 JORDAN M JENKINS, JR \$15,402 GORDON R METZ, JR \$4,710 STEPHEN SAUFLEY \$1,540 PETER TRUBMAN \$11,076 WILLIAM E WALTON \$5,165 HENRY E WOOD, JR \$15,702 MARTHA MOORE \$13,000 GREG HICKS \$11,050 ARCHIE ATWELL \$1,245 ROBERT C HARRIS \$735 EDWARD SHARER \$13,701			

Schedule J (Form 990) 2012

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As Filed Data -

DLN: 93493210000353

OMB No 1545-0047

Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on

Form 990 or to provide any additional information.

Attach to Form 990 or 990-EZ.

Name of the organization VIRGINIA FARM BUREAU FEDERATION Employer identification number

54-0419002

Identifier	Return Reference	Explanation
		THE VIRGINIA FARM BUREAU FEDERATION HAS 88 MEMBERS THIS IS A FEDERATION OF THE COUNTY FARM BUREAUS IN VIRGINIA EACH COUNTY FARM BUREAU IS AN AUTONOMOUS BODY RUN BY ITS OWN MEMBERS AND BOARDS OF DIRECTORS EACH COUNTY FARM BUREAU HAS APPROVED JOINING WITH THE VIRGINIA FARM BUREAU FEDERATION AND THE OTHER COUNTY FARM BUREAUS IN VIRGINIA TO FORM THIS FEDERATION TO BETTER SERVE THE MEMBERS OF ALL FARM BUREAUS IN VIRGINIA

Identifier	Return Reference	Explanation
	,	MEMBERS OF THE GOVERNING BODY ARE ELECTED BY THE MEMBERS OF THE ORGANIZATION VOTING STRENGTH OF THE MEMBERS IS DETERMINED BY THE NUMBER OF PRODUCER MEMBERS WITHIN EACH COUNTY FARM BUREAU THE MEMBERS OF THE VIRGINIA FARM BUREAU FEDERATION (88 COUNTY FARM BUREAUS) HAVE THE AUTHORITY TO, AND DO, ELECT ALL THE MEMBERS OF THE BOARD OF DIRECTORS EACH COUNTY FARM BUREAU SENDS THEIR VOTING REPRESENTATIVES TO A MEETING OF THE FEDERATION REPRESENTATIVES FROM EACH COUNTY FARM BUREAU IN A DISTRICT NOMINATE A PERSON TO SIT ON THE BOARD BUT THE ELECTION IS DECIDED BY ALL REPRESENTATIVES OF THE COUNTY FARM BUREAUS VOTING IN ONE PLACE, AT ONE TIME TO ELECT ALL MEMBERS OF THE GOVERNING BODY (THE BOARD OF DIRECTORS)

Identifier	Return Reference	Explanation
	1	THE ONLY DECISIONS OF THE GOVERNING BODY (BOARD OF DIRECTORS) WHICH ARE SUBJECT TO THE APPROVAL OF THE MEMBERS ARE THOSE TO CHANGE THE BYLAWS OF THE FEDERATION THE BOARD OF DIRECTORS CAN AMEND THE BYLAWS BUT ANY AMENDMENT IS SUBJECT TO RATIFICATION BY THE MEMBERS

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 8B	THERE ARE NO COMMITTEES OF THE BOARD WITH AUTHORITY TO ACT IN THE PLACE OF THE BOARD ALL STANDING COMMITTEES ARE ADVISORY TO THE BOARD AND ARE NOT CHARGED WITH AUTHORITY TO ACT MINUTES OF MEETINGS OF ADVISORY COMMITTEES OF THE BOARD OF DIRECTORS ARE RECORDED CONTEMPORANEOUSLY AND PRESENTED TO THE NEXT COMMITTEE MEETING WITH ANY COMMITTEE RECOMMENDATIONS REPORTED TO THE BOARD OF DIRECTORS

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	A COPY OF THE FORM 990 IS PROVIDED TO THE MEMBERS OF THE BOARD OF DIRECTORS' BUDGET AND AUDIT COMMITTEE BEFORE IT IS FILED THEY ARE PROVIDED A REVIEW BY MANAGEMENT STAFF AND GIVEN AN OPPORTUNITY TO ASK ANY QUESTIONS BEFORE COMPLETING THE FORM 990, ALL OFFICERS OF THE ORGANIZATION WITH SPECIAL KNOWLEDGE IN THE VARIOUS AREAS COVERED BY THE FORM 990 QUESTIONS ARE ASKED FOR THEIR REVIEW AND CONFIRMATION OF ACCURACY IN THE REPORT A COPY OF THE FORM 990 IS MAINTAINED BY THE CORPORATE SECRETARY FOR THE REVIEW OF ANY MEMBERS OF THE BOARD OF DIRECTORS WHO WISHES TO REVIEW THE FORM

ldentifier F	Return Reference	Explanation
P/ Si	SECTION B, INE 12C	THE VIRGINIA FARM BUREAU'S BOARD-APPROVED WRITTEN CONFLICT OF INTEREST POLICY IS READ AND SIGNED BY EACH MEMBER OF THE BOARD OF DIRECTORS, EACH OFFICER, AND EACH KEY STAFF AT LEAST ONCE EACH CALENDAR YEAR COPIES ARE KEPT ON FILE BY THE CORPORATE SECRETARY ANY FORMS THAT ARE SIGNED WITH THE NOTATION OF "WITH EXCEPTION" ARE PRESENTED TO THE CHIEF EXECUTIVE OFFICER FOR HIS REVIEW AND INITIALS IF A MANAGEMENT DECISION IS NEEDED IN AN AREA WHERE A KEY EMPLOYEE HAS SIGNED THEIR FORM AS "WITH EXCEPTION" THAT EMPLOYEE IS EXPECTED TO REPORT THAT SITUATION TO THEIR IMMEDIATE SUPERVISOR, FROM THERE IT IS TO BE RECORDED AND THEN REPORTED TO THE HUMAN RESOURCES SENIOR VICE PRESIDENT OR SENIOR MANAGEMENT IF CONSIDERED MATERIAL BY THE HUMAN RESOURCES SENIOR VICE PRESIDENT THE CHIEF EXECUTIVE OFFICER ALSO CHAIRS ALL OF THE BOARD MEETINGS AND HAS KNOWLEDGE OF EACH DIRECTOR'S "EXCEPTIONS" FOR SIGNED/REPORTED CONFLICTS THE CHIEF EXECUTIVE OFFICER WILL ASK A DIRECTOR TO REPORT THAT CONFLICT OR POSSIBLE CONFLICT TO THE BOARD BEFORE VOTING, OR BE ASKED TO RECUSE THEMSELVES FROM A VOTE INVOLVING A POSSIBLE CONFLICT EITHER ACTION WOULD BE RECORDED IN THE MINUTES OF THE MEETING

Identifier Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE OFFICE OF PRESIDENT OF THE VIRGINIA FARM BUREAU FEDERATION IS AN ELECTED POSITION PERIODICALLY, HUMAN RESOURCES SENDS THE BUDGET AND AUDIT COMMITTEE THE PRESIDENT'S CURRENT SALARY, THE SALARY RANGE OF THE POSITION, AND THE AVERAGE SUGGESTED INCREASE PERCENTAGE FOR EXECUTIVES BASED ON SALARY SURVEY DATA THE SALARY IS REVIEWED AND THE INCREASE IS RECOMMENDED BY THE COMPANY'S BUDGET AND AUDIT COMMITTEE WHICH IS MADE UP OF THREE OF THE EIGHTEEN BOARD OF DIRECTORS THE BOARD OF DIRECTORS REVIEWS AND APPROVES THE RECOMMENDATION OF THE BUDGET AND AUDIT COMMITTEE. THIS PROCESS IS REVIEWED DURING THE EXECUTIVE SESSION OF THE BOARD OF DIRECTORS THE SECRETARY OF THE COMPANY HAS RECORDED MINUTES OF THE SALARY APPROVAL THIS IS AN ANNUAL PROCESS WHICH OCCURS DURING THE FIRST QUARTER OF THE YEAR FOLLOWING AND THE SALARY IS EFFECTIVE JANUARY 1 OF THE FOLLOWING YEAR THE OFFICE OF THE CORPORATE SECRETARY OF THE VIRGINIA FARM BUREAU FEDERATION IS AN APPOINTED POSITION A MARKET STUDY USING SALARY SURVEY DATA IS COMPLETED BY HUMAN RESOURCES TO DETERMINE THE APPROPRIATE SALARY RANGE FOR THE POSITION THIS WAS MOST RECENTLY COMPLETED IN 2007 AN ANNUAL PERFORMANCE REVIEW PROCESS (PPR) IS DONE AND THE MERIT INCREASE IS DETERMINED BASED ON THE PPR SCORE. THE PRESIDENT WILL THEN SUBMIT THE REQUESTED SALARY INCREASE TO HUMAN RESOURCES FOR PROCESSING. DOCUMENTATION OF THE PPR RATING AND REQUESTED SALARY INCREASE IS MAINTAINED IN HUMAN RESOURCES. THIS IS AN ANNUAL PROCESS WHICH TAKES PLACE IN THE FIRST QUARTER OF THE FOLLOWING YEAR WITH SALARY INCREASE EFFECTIVE APRIL 1

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THE VIRGINIA FARM BUREAU FEDERATION IS NOT REQUIRED TO PROVIDE THE GENERAL PUBLIC WITH ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, OR FINANCIAL STATEMENTS AS A MEMBERSHIP ORGANIZATION WITH 88 MEMBERS OF THE FEDERATION (MEMBERS ARE THE COUNTY FARM BUREAUS BASED IN COUNTIES IN VIRGINIA) AND THROUGH THE COUNTY FARM BUREAUS SERVING OVER 146,800 FAMILY MEMBERSHIPS, WE WILL PROVIDE TO A MEMBER ACCESS TO THE GOVERNING DOCUMENTS, LISTS OF MEMBERS, FINANCIAL INFORMATION AND MINUTES A MEMBER MUST SUBMIT THEIR REQUEST TO THE CORPORATE SECRETARY IN WRITING ALLOWING UP TO 10 DAYS FOR ACCESS A REASON MUST BE GIVEN FOR THE REQUEST AND THE DOCUMENTS REQUESTED MUST HAVE RELEVANCE TO THE REASON AT THE ANNUAL MEETING OF THE VIRGINIA FARM BUREAU FEDERATION FINANCIAL STATEMENTS ARE PROVIDED TO ALL MEMBERS AS WELL AS COPIES OF THE GOVERNING DOCUMENTS

ldentifier	Return Reference	Explanation	
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 9	LOSS ON IMPAIRMENT OF INVESTMENTS -91,660	

Identifier	Return Reference	Explanation
BUDGET AND AUDIT COMMITTEE	FORM 990, PART XII, LINE 2C	THE BUDGET AND AUDIT COMMITTEE ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF THE FINANCIAL STATEMENTS AND RECOMMENDS THE SELECTED AUDITOR TO THE FULL BOARD OF DIRECTORS FOR APPROVAL AND APPOINTMENT

SCHEDULE R Related Ord

(Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization VIRGINIA FARM BUREAU FEDERATION

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

DLN: 93493210000353OMB No 1545-0047

Employer identification number

2012

Open to Public Inspection

or more related tax-exempt organizations during the tax year.) (a) Name, address, and EIN of related organization Primary activity Legal domicile (state or foreign country) Exempt Code section Public charity status (if section 501(c)(3)) First controlling entity First No. Test					54-04190	02			
Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, Inte 34 because it had one or more related tax-exempt organizations during the tax year.) Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, Inte 34 because it had one or more related tax-exempt organizations during the tax year.)	Part I Identification of Disregarded Entities (Complete	ıf the organızatıor	answered "Yes" to	o Form 990, Pa	irt IV, line 33.)				
or more related tax-exempt organizations during the tax year.) (a) Name, address, and EIN of related organization Phimary activity Legal domicile (state or foreign country) Exempt Code section Public charity status (if section 501(c)(3)) Press No. Telescondary (a) Primary activity Primary	(a) Name, address, and EIN (ıf applıcable) of dısregarded entıty		(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	Dı	rect controlling		
or more related tax-exempt organizations during the tax year.) (a) Name, address, and EIN of related organization Primary activity Legal domicile (state or foreign country) Exempt Code section Public charity status (if section 501(c)(3)) Prince controlling entity Fig. 103 controlling entity Fig. 104 columns of the section 501(c)(3) and the section 501(c)(4) and the section 501(c)(4) and the secti									
or more related tax-exempt organizations during the tax year.) (a) Name, address, and EIN of related organization Primary activity Legal domicile (state or foreign country) Exempt Code section Public charity status (if section 501(c)(3)) Prince controlling entity Fig. 103 controlling entity Fig. 104 columns of the section 501(c)(3) and the section 501(c)(4) and the section 501(c)(4) and the secti									
or more related tax-exempt organizations during the tax year.) (a) Name, address, and EIN of related organization Phimary activity Legal domicile (state or foreign country) Exempt Code section Public charity status (if section 501(c)(3)) Press No. Telescondary (a) Primary activity Primary									
or more related tax-exempt organizations during the tax year.) (a) Name, address, and EIN of related organization Phimary activity Legal domicile (state or foreign country) Exempt Code section Public charity status (if section 501(c)(3)) Press No. Telescondary (a) Primary activity Primary									
or more related tax-exempt organizations during the tax year.) (a) Name, address, and EIN of related organization Primary activity Legal domicile (state or foreign country) Exempt Code section Public charity status (if section 501(c)(3)) Prince controlling entity Fig. 103 controlling entity Fig. 104 columns of the section 501(c)(3) and the section 501(c)(4) and the section 501(c)(4) and the secti									
Name, address, and EIN of related organization Primary activity Legal domicile (state or foreign country) Public charity status (if section 501(c)(3)) Public charity status (if section 501(c)(3)) Prince controlling entity Yes No. Public charity status (if section 501(c)(3)) Primary activity Legal domicile (state or foreign country) Primary activity Legal domicile (state or foreign country) Public charity status (if section 501(c)(3))	Part II Identification of Related Tax-Exempt Organization or more related tax-exempt organizations during the	tions (Complete if tax year.)	the organization a	inswered "Yes"	to Form 990, P	art IV,	line 34 because i	t had or	ne
			Legal domicile (state		ion Public charity :	status (c)(3))	Direct controlling	Section (13) co ent	n 512(b ontrolle tity?
For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No. 50135Y Schedule R (Form 990) 2012								Yes	No
For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 50135Y Schedule R (Form 990) 2012									
For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 50135Y Schedule R (Form 990) 2012								\perp	
For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No. 50135Y Schedule R (Form 990) 2012									
For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No. 50135Y Schedule R (Form 990) 2012									
For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No. 50135Y Schedule R (Form 990) 2012								_	
	For Paperwork Reduction Act Notice, see the Instructions for Form 990.		Cat No 501	35Y			Schedule R (For	m 990) 2	2012

Part III Identification of Related Org because it had one or more related to the control of the	anizations Taxat ed organizations ti	ole as a Partn reated as a par	ership tnershi	(Complete p during th	e if the orga e tax year.	nization a)	nswered	"Yes" t	o For	m 990, Par	t IV,	line 3	34
(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (relate unrelated, excluded fron tax under sections 512- 514)	d, total incom	(g) Share of e end-of-yea assets		rtionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana parti	ral or aging ner?	(k) Percentage ownership
								Yes	No		Yes	No	
(1) TOBIO LLC 12580 WEST CREEK PARKWAY RICHMOND, VA 23238 54-1973793		SUPPORT OF TRANGENIC TOBACCO (INACTIVE)	VA		UNRELATED				No		Yes		
Part IV Identification of Related Orgaline 34 because it had one or mo								answer	ed "Y	es" to Forn	n 990), Par	t IV,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreigr country)	1	(d) Direct contro entity	lling Type of (C corp corp or tru:	entity Share o, S inco	of total Sha	(g) are of end of-year assets		(h) Percentage ownership	Sect (b cor e	(i) tion 512 o)(13) ntrolled ntity?	
See Additional Data Table									-		Ye	25	No

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule										
1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more re	lated organizations li	sted in Parts II-IV?							
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a	Yes				
b	Gift, grant, or capital contribution to related organization(s)				1b		No			
c	Gift, grant, or capital contribution from related organization(s)				1c		No			
d	Loans or loan guarantees to or for related organization(s)				1d		No			
e	Loans or loan guarantees by related organization(s)				1e		No			
f	Dividends from related organization(s)				1f		No			
g	Sale of assets to related organization(s)				1g		No			
h	Purchase of assets from related organization(s)				1h		No			
i	Exchange of assets with related organization(s)				1i		No			
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		No			
k Lease of facilities, equipment, or other assets from related organization(s)										
1	I Performance of services or membership or fundraising solicitations for related organization(s)									
m	m Performance of services or membership or fundraising solicitations by related organization(s)									
n	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)									
0	Sharing of paid employees with related organization(s)				10		No			
р	Reimbursement paid to related organization(s) for expenses				1 p		No			
q	Reimbursement paid by related organization(s) for expenses				1q		No			
r	r Other transfer of cash or property to related organization(s)									
s	Other transfer of cash or property from related organization(s)				1s		No			
						•				
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete	this line, including co	vered relationships	and transaction thresholds						
	(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amo	ount ir	nvolved				
ee A	ditional Data Table									

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross)

revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512- 514)	org	(e) all partners section 501(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprionate allocations? Yes No		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes No		(k) Percentage ownership
			514)	Yes	No								
												1	

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier Return Reference Explanation

Software ID: Software Version:

EIN: 54-0419002

Name: VIRGINIA FARM BUREAU FEDERATION

Form 990, Schedule R, Part IV - Id	entification of Related Org	anizations Taxa	able as a Corpo	ration or	Trust				
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Secti 512(b) contro entit Yes	ion (13) illed
VIRGINIA FARM	HOLDING COMPANY			C	-364,677	2,599,094	100 000 %	Yes	No
BUREAU HOLDING CORPORATION	HOLDING COMPANT				-364,677	2,399,094	100 000 %		NO
12580 WEST CREEK PARKWAY RICHMOND, VA 23238 54-0929947		VA							
VIRGINIA FARM BUREAU SERVICE CORPORATION	INSURANCE BROKER		VIRGINIA FARM BUREAU HOLDING COPORATION	С	2,913,034	6,482,001			No
12580 WEST CREEK PARKWAY RICHMOND, VA 23238 54-0796340		VA							
VIRGINIA FARM BUREAU INSURANCE AGENCY INC 12580 WEST CREEK	INSURANCE BROKER	VA	VIRGINIA FARM BUREAU HOLDING COPORATION	С	71,042	894,809			No
PARKWAY RICHMOND, VA 23238 54-0929948		VA							
EMPLOYEE BENEFIT CORPORATION OF AMERICA	INSURANCE BROKER		VIRGINIA FARM BUREAU HOLDING COPORATION	С	4,577,902	7,522,065			No
12580 WEST CREEK PARKWAY RICHMOND, VA 23238 54-2015926		VA							
CUSTOM HEALTH CARE INC 12580 WEST CREEK	INSURANCE BROKER		VIRGINIA FARM BUREAU HOLDING COPORATION	С	31,203	131,289			No
PARKWAY RICHMOND, VA 23238 03-0382095		VA	COPORATION						
ORGANIZATIONAL MANAGEMENT INC 12580 WEST CREEK	MARKETING SERVICE		VIRGINIA FARM BUREAU HOLDING COPORATION	С	-9,044	81,171			No
PARKWAY RICHMOND, VA 23238 41-2071427		VA	COPORATION						
BENEFIT DESIGN GROUP INC	INSURANCE BROKER		VIRGINIA FARM BUREAU HOLDING	С	2,821	4,537,507			No
12580 WEST CREEK PARKWAY RICHMOND, VA 23238 37-1694672		VA	COPORATION						
VIRGINIA FARM BUREAU MARKETING ASSOCIATION	AGRICULTURAL SERVICE			С		9,818	100 000 %		No
12580 WEST CREEK PARKWAY RICHMOND, VA 23238 54-0700947		VA							

--> Form 990, Schedule R, Part V - Transactions With Related Organizations

(a) Name of other organization	(b) Transaction type(a-s)	(c) A mount Involved	(d) Method of determining amount involved
VIRGINIA FARM BUREAU HOLDING CORPORATION	А	2,887	
VIRGINIA FARM BUREAU SERVICE CORPORATION	А	102,150	
VIRGINIA FARM BUREAU INSURANCE AGENCY INC	А	715	
EMPLOYEE BENEFITS CORPORATION OF AMERICA	А		
CUSTOM HEALTH CARE INC	А	-100	
ORGANIZATIONAL MANAGEMENT INC	А		
BENEFIT DESIGN GROUP INC	А	0	
VIRGINIA FARM BUREAU MARKETING ASSOCIATION	А	-7	

Software ID: Software Version:

EIN: 54-0419002

Name: VIRGINIA FARM BUREAU FEDERATION

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) Average hours per week (list any	dıre	than	o not one son i er an trust	box s bo d a tee)	, th	1	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related		
	hours for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			organizations		
WAYNE F PRYOR PRESIDENT	40 00	Х		х				256,764	0	24,997		
SCOTT E SINK VICE PRESIDENT	2 00	х		х				3,051	0	0		
NATHAN A AKER DIRECTOR	2 00	Х						3,551	0	0		
JANICE R BURTON DIRECTOR	2 00	Х						7,927	0	8,872		
EMILY F EDMONDSON DIRECTOR	2 00	X						13,738	0	2,417		
MARVIN L EVERETT JR DIRECTOR	2 00	x						282	0	16,745		
THOMAS E GRAVES JR DIRECTOR	2 00	х						11,271	0	4,794		
DAVID L HICKMAN DIRECTOR	2 00	х						12,726	0	2,541		
EVELYN H JANNEY DIRECTOR	2 00	х						28,862	0	0		
JORDAN M JENKINS JR DIRECTOR	2 00	Х						141	0	18,828		
GORDON R METZ JR DIRECTOR	2 00	х						10,748	0	6,157		
ROBERT J MILLS JR DIRECTOR	2 00	х						14,834	0	0		
STEPHEN L SAUFLEY DIRECTOR	2 00	х						13,468	0	2,675		
RICHARD L SUTHERLAND DIRECTOR	2 00	х						3,051	0	0		
H CARL TINDER SR DIRECTOR	2 00	х						14,934	0	0		
PETER A TRUBAN DIRECTOR	2 00	х						4,607	0	12,400		
WILLIAM E WALTON DIRECTOR	2 00	х						9,978	0	5,960		
HENRY E WOOD JR DIRECTOR	2 00	х						282	0	17,951		
JONATHAN S SHOUSE SECRETARY	40 00			х				121,090	0	15,346		
JEFFREY W DILLON TREASURER	4 00			х				0	0	0		
DAVID A PRIDDY ASST TREASURER	4 00			х				0	0	0		
PEGGY L MCCLELLAND ASST TREASURER	4 00			х				0	0	0		
J CLAY FRANCIS HIGHEST COMPENSATED EMPLOY	40 00					х		136,230	0	15,617		
MARTHA A MOORE HIGHEST COMPENSATED EMPLOY	40 00					х		123,816	0	17,784		
GREGORY K HICKS HIGHEST COMPENSATED EMPLOY	40 00					х		120,222	0	7,833		

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

0 00

EDWARD A SCHARER

FORMER OFFICER/DIRECTOR

Compensated Employees, and indeper	ident Contra	ictors								
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)		than	not one son is er an trust	box s bot d a tee)	, th	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
ALBERT K GLASS HIGHEST COMPENSATED EMPLOY	40 00					x		109,351	0	9,415
ARCHIE B ATWELL FORMER DIRECTOR	0 00						х	11,347	0	2,341
ROBERT C HARRIS FORMER DIRECTOR	0 00						Х	11,798	0	1,375

141

0

16,721