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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 private foundations)

► Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

| A Fo | r the | 2013 ca | lendar year, or tax year beginning | 01-01-2013 , 2013, and ending 12- | -31-2013 | | | |
|--------------------------------|----------------|---------------|--|--|---------------|---------------------------------|----------------|----------------------------|
| B Ch | eck if a | applicable | C Name of organization VIRGINIA FARM BUREAU FEDERATION | 1 | | D Emplo | yer ident | tification number |
| | dress c | | VIRGINIA FARM BOREAU FEDERATION | • | | 54-0 | 419002 | |
| ┌ Na | me cha | ange | Doing Business As | | | | | |
| ┌ Inr | tıal retu | um | Number and street (or P.O. box if ma | ul is not delivered to street address) Room/ | suite | F.T.L. | | |
| Гте | rmınate | ed | P O BOX 27552 | in is not delivered to street address, Room, | Jaice | E Teleph | one numb | er |
| ┌ Am | nended | return | City or town, state or province, count | ry, and ZIP or foreign postal code | | (804) | 290-10 | 000 |
| ☐ Ap | plicatio | n pendino | RICHMOND, VA 232617552 | | | G Gross | receints ¢ | 14,215,300 |
| | | | F Name and address of princ | cipal officer | H(2) 1 | | • | <u> </u> |
| | | | WAYNE F PRYOR | sipal officer | | s this a group subordinates? | | r Yes r No |
| | | | P O BOX 27552 RICHMOND, VA 23261755 | 2 | | | | |
| | | | | _ | 1 | Are all subord ncluded? | ınates | Γ Y es Γ No |
| I Ta | ıx-exer | mpt statu | s | nsert no) 4947(a)(1) or 527 | | | nalıst (| see instructions) |
| | ebsit | e:► W | WW VAFB COM | | H(c) | Group exemp | tion niim | her ► |
| | | | | | 1(-) | | | |
| | m of o | _ | n 🔽 Corporation 🗀 Trust 🗀 Association |) Other ► | L Year | of formation 19 | 926 M S | state of legal domicile VA |
| ΓG | | | | | | | | |
| | | | describe the organization's missior ICING THE AGRICULTURAL INTE | i or most significant activities ERESTS OF MEMBERS THROUGH E | CONOMI | C, POLITICA | L & SOC | IAL PROGRAMS |
| a a | | | | | | | | |
| ≧ | | | | | | | | |
| 霪 | | | | | | | | |
| = | , | Check | this box 🕶 if the organization dis | continued its operations or disposed | l of more th | nan 25% of its | net ass | ets |
| Š. | - | CHECK | in box F If the organization also | continued its operations of disposed | | 1411 25 70 01 165 | 7 1100 455 | |
| Activities & Governance | 3 | Numbe | r of voting members of the governir | ng body (Part VI, line 1a) | | | з | 18 |
| ۵ د | 4 | Numbe | r of independent voting members of | f the governing body (Part VI, line 1 $^{\circ}$ | b) | | 4 | 17 |
| 舅 | 5 | Total n | umber of individuals employed in c | alendar year 2013 (Part V, line 2a) | | | 5 | 199 |
| ទ្ធ | 6 | Total n | umber of volunteers (estimate if ne | cessary) | | | 6 | 810 |
| • | 7a | Total u | nrelated business revenue from Pa | rt VIII, column (C), line 12 | | | 7a | 990,168 |
| | Ь | Net unr | elated business taxable income fro | om Form 990-T, line 34 | | | 7b | 450,467 |
| | | | | | | Prior Year | | Current Year |
| | 8 | Cont | ributions and grants (Part VIII, line | e 1 h) | | | 0 | 0 |
| ₽ | 9 | Progi | ram service revenue (Part VIII, lin | e 2g) | | 2,961, | 667 | 2,711,394 |
| Revenue | 10 | | | (A), lines 3, 4, and 7d) | | 4,433, | 456 | 4,712,327 |
| ř | 11 | Othe | r revenue (Part VIII, column (A), l | ines 5, 6d, 8c, 9c, 10c, and 11e) | | 2,908, | 339 | 3,115,410 |
| | 12 | | | must equal Part VIII, column (A), lı | ne | | | |
| | | | <u> </u> | | | 10,303, | | 10,539,131 |
| | 13 | | | X, column (A), lines 1-3) | | 160, | | 155,656 |
| | 14 | | | (, column (A), line 4) | | | 0 | 0 |
| 82 | 15 | Salar 5-10 | | e benefits (Part IX, column (A), lines | | 6,605, | 088 | 5,638,167 |
| Expenses | 16a | | • | column (A), line 11e) | | | 0 | 0 |
| ₹ | Ь | | fundraising expenses (Part IX, column (D), | | | | | |
| ш | 17 | | | nes 11a-11d, 11f-24e) | | 3,183, | 238 | 3,121,273 |
| | 18 | | | t equal Part IX, column (A), line 25) | | 9,949, | | 8,915,096 |
| | 19 | | | 8 from line 12 | | 354, | | 1,624,035 |
| <u>> 00</u> | | | | | | nning of Curre | | |
| Net Assets or Fund Balances | | | | | | Year | | End of Year |
| 3,4 <u>5</u> | 20 | | assets (Part X, line 16) | | | 40,446, | | 49,365,760 |
| 2 E | 21 | | | | · | 17,257, | | 21,790,248 |
| | 22 | | assets or fund balances Subtract II | ine 21 from line 20 | | 23,189, | 470 | 27,575,512 |
| Pa | rt II | Sig | nature Block | | | | | |
| Unde my k | r pen nowle | alties o | f perjury, I declare that I have exar | mined this return, including accompa plete Declaration of preparer (other | | | | |
| | | T ı | | | | 1 | | |
| | | IB | **** | | | 2014-10-08 | | |
| Sign | | F Sigi | nature of officer | | | Date | | |
| Her | е | | YNE F PRYOR PRESIDENT be or print name and title | | | | | |
| | | | • | Dranarade eignature | Date | | LDTIN | |
| . | _1 | | Print/Type preparer's name | Preparer's signature | Date | Check If self-employed | PTIN | |
| Paid | | Ì | Firm's name 🕨 | - | | Firm's EIN | | _ |
| | pare | | Final address P | | | Dhan | | |
| Use | On | ılv İ | Firm's address 🟲 | | | Phone no | | |

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

┌Yes ┌No

| 4a (Codd A MAI PUBL AGRII OUR GOVE AGRII 4b (Codd PROM BROC 4c (Codd A SPE | (Code A MAGAZINE FOR PROD PUBLISHED FOUR TIMES OUR ASSOCIATE (NON- GOVERNMENT ACCESS, AGRICULTURE (Code PROMOTIONAL SUPPOR BROCHURES, PRINT AD (Code A SPECIALLY TRAINED S |) (Expenses \$ UCER MEMBERS, FARM BUREAU S A YEAR THE PURPOSE OF THE AND PROVIDE THEM WITH EDUC FARMER) MEMBERS A WEEKLY T NETWORK AFFILIATE STATIONS) (Expenses \$ T IS PROVIDED TO COUNTY FARM S AND RADIO ADS THE FEDERAT) (Expenses \$ | INCluding grants of \$ NEWS, IS PUBLISHED SIX TIMES A YEAR A N FARM BUREAU NEWS IS TO KEEP PRODUCE! ATIONAL MATERIALS THE PURPOSE OF CUL TELEVISION PROGRAM, REAL VIRGINIA, IS PR AND THE DISH AND DIRECT TV SATELLITE NI INCluding grants of \$ 1 BUREAUS THROUGH THE COUNTY NEWSLE TION ALSO PROVIDES MEDIA RELATIONS TRA INCluding grants of \$ INCluding grants of \$ INCLUDING STATE AND FEDER | R MEMBERS (FARMERS) ABREAST A LTIVATE IS TO PROMOTE THE IMPOR' RODUCED AND AIRS WEEKLY ON 46 IETWORKS THE PURPOSE IS TO PRO) (Revenue \$ ETTER PROGRAM, AS WELL AS THE D AINING AND SUPPORT TO COUNTY FA) (Revenue \$ | ND AWARE OF FANCE OF AGRICULTURE TO LOCAL ACCESS, OMOTE THE IMPORTANCE OF OFFICE OF ARM BUREAUS OFFICE OFFI |
|--|--|--|---|--|---|
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| the to | | | |) (Revenue \$ |) |
| | | | n program service reported | c amount or grants and amouat | ions to others, |
| 4 Desci | escribe the organiz | |) complishments for each of its three janizations are required to report the | | measured by |
| 3 Did th | • | =- | ule O significant changes in how it condu | cts, any program | □Yes ☑No |
| | | | orogram services during the year whi | ich were not listed on | ┌ Yes ┌ No |

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 "Yes," complete Schedule C, Part II</i> | 4 | | |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i> | 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^{\square} | 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? <i>If "Yes,"</i> complete Schedule D, Part III | 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^{\square} | 9 | | No |
| L O | 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^{\square} | 10 | | No |
| 1 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, 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 |
| C | 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 | 1 |
| 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 | |
| l2a | 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 | |
| .3 | Is the organization a school described in section 170 (b)(1)(A)(II)? If "Yes," complete Schedule E | 13 | | No |
| .4a | 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 |
| L 5 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV | 15 | | No |
| l 6 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV | 16 | | No |
| .7 | 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 |
| .8 | 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 |
| L 9 | 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 or other assistance to any domestic organization or government 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 or 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? <i>If "Yes," complete Schedule J.</i> | 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 25a | 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? <i>If "Yes," complete Schedule L, Part I</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 | Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, 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? <i>If "Yes," complete Schedule L, Part III </i> | 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 | 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? <i>If "Yes," complete Schedule M</i> | 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 | | No |
| 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? <i>If "Yes," complete Schedule R, Part I</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? <i>If "Yes," complete Schedule R, Part V, line 2</i> | 36 | | |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 37 | | No |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note, All Form 990 filers are required to complete Schedule O | 38 | Yes | |

| - | Check of School and Company of the C | | | _ |
|---|--|----------|------|------------------|
| | Check if Schedule O contains a response or note to any line in this Part V | <u> </u> | Yes | <u>.</u> l No |
| a | Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 87 | | | |
| | 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 | 1 | | |
| | gaming (gambling) winnings to prize winners? | 1c | Yes | |
| 1 | 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 | | | |
| | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | 2b | Yes | |
| | Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a | Yes | |
| | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O | 3b | Yes | |
| | 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)? | 4a | | N |
| | 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 | | | |
| | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | N |
| | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | N |
| | If "Yes," to line 5a or 5b, did the organization file Form 8886-T? | | | |
| | 2. 105, to the 50 of 55, and the organization metrorin 0000 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. | 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 | | N |
| | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | 6b | | |
| | 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 | 7a | | |
| | services provided to the payor? | | | |
| | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | | |
| | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | 7c | | |
| | If "Yes," indicate the number of Forms 8282 filed during the year | | | |
| | · · · · · · · · · · · · · · · · · · · | 1 | | |
| | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | |
| | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | | |
| | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as | | | |
| | required? | 7g | | |
| | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | 7h | | |
| | 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 | | |
| | Sponsoring organizations maintaining donor advised funds. | Ť | | |
| | 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 | | | |
| | Section 501(c)(12) organizations. Enter | | | |
| | Gross income from members or shareholders | | | |
| ı | 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 | | |
| | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | | | |
| | Section 501(c)(29) qualified nonprofit health insurance issuers. | 1 | | |
| | Is the organization licensed to issue qualified health plans in more than one state? | 13a | | |
| | Note. See the instructions for additional information the organization must report on Schedule O 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 | - | | |
| | | | | ĸ · |
| | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | N |
| | If "Yes" has it filed a Form 7.20 to report these payments? If "No" provide an explanation in Schedule O | 14h | | |

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

| Check if Schedule O | contains a res | nonse or not | e to anv | line in this | Part VI | _ | _ | _ | _ | _ | _ | | | _ | マ |
|---------------------|----------------|--------------|----------|--------------|----------|---|-------|---|---|---|---|---|---|---|-----|
| Check ii Schedale O | contains a res | ponse or not | c co any | mile in this | I GIC VI | | • | • | • | • | | • | • | • | ••• |

| Se | ection A. Governing Body and Management | | | |
|--------------------------------------|--|--|-------------------------------------|-----|
| | | | Yes | No |
| 1 a | Enter the number of voting members of the governing body at the end of the tax year | | | |
| | If there are material differences in voting rights among members of the governing 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 | | Νo |
| 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 | | Νo |
| 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 | | Νo |
| Se | ection B. Policies (This Section B requests information about policies not required by the Internal R | evenu | ie Cod | e.) |
| | | | Yes | No |
| | | | | |
| 10a | Did the organization have local chapters, branches, or affiliates? | 10a | Yes | |
| | Did the organization have local chapters, branches, or affiliates? | 10a 10b | | |
| b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, | | Yes | |
| b 11a | 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 | 10b | Yes | |
| b 11a b | 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? | 10b | Yes | |
| b 11a b 12a b | 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? | 10b | Yes Yes Yes | |
| b 11a b 12a b | 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? | 10b 11a 12a | Yes Yes Yes | |
| b 11a b 12a b | 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? | 10b 11a 12a 12b | Yes Yes Yes Yes Yes | |
| b 11a b 12a b | 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? | 10b 11a 12a 12b 12c | Yes Yes Yes Yes Yes Yes | |
| b 11a b 12a b c | 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? | 10b 11a 12a 12b 12c 13 | Yes Yes Yes Yes Yes Yes Yes | |
| b 11a b 12a b c 13 | 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? | 10b 11a 12a 12b 12c 13 | Yes Yes Yes Yes Yes Yes Yes | |
| b 11a b 12a c 13 14 15 | 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? | 10b 11a 12a 12b 12c 13 14 | Yes Yes Yes Yes Yes Yes Yes Yes Yes | |
| b 11a b 12a c 13 14 15 | 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 | 10b 11a 12a 12b 12c 13 14 | Yes Yes Yes Yes Yes Yes Yes Yes Yes | |
| b 11a b 12a c 13 14 15 a b | 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? | 10b 11a 12a 12b 12c 13 14 | Yes Yes Yes Yes Yes Yes Yes Yes Yes | No |
| b 11a b 12a c 13 14 15 a b | 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 | 10b 11a 12a 12b 12c 13 14 15a 15b | Yes Yes Yes Yes Yes Yes Yes Yes Yes | |
| b 11a b 12a c 13 14 15 a b 16a b | 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 whistleblower 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? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the | 10b 11a 12a 12b 12c 13 14 15a 15b 16a | Yes Yes Yes Yes Yes Yes Yes Yes Yes | |
| b 11a b 12a c 13 14 15 a b 16a b | 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? | 10b 11a 12a 12b 12c 13 14 15a 15b 16a | Yes Yes Yes Yes Yes Yes Yes Yes Yes | |

- (3)s only) available for public inspection Indicate how you made these available Check all that apply Own website Another's website Upon 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
- 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 23238 (804) 290-1000

<u>Part VII</u> 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) Name and Title | (B) A verage hours per week (list any hours | more pers | than on is | one bot | not box h an or/tr | offic | ess er | (D) Reportable compensation from the organization | (E) Reportable compensation from related organizations | (F) 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 | 40 00 | х | | х | | | | 298,170 | 0 | 27,777 |
| PRESIDENT (2) SCOTT E SINK | 3.00 | | | | | | | | | |
| VICE PRESIDENT | 2 00 | × | | х | | | | 17,656 | 0 | C |
| (3) NATHAN A AKER | 2 00 | | | | | | | | | |
| DIRECTOR | | X | | | | | | 17,006 | 0 | C |
| (4) JANICE R BURTON | 2 00 | | | | | | | | | |
| DIRECTOR | | X | | | | | | 10,335 | 0 | 7,419 |
| (5) EMILY F EDMONDSON | 2 00 | | | | | | | | | |
| DIRECTOR | | X | | | | | | 3,346 | 0 | 13,769 |
| (6) MARVIN L EVERETT JR | 2 00 | | | | | | | | | |
| DIRECTOR | | x | | | | | | 145 | 0 | 17,808 |
| (7) THOMAS E GRAVES JR | 2 00 | | | | | | | | | |
| | | х | | | | | | 12,152 | 0 | 4,948 |
| DIRECTOR (8) DAVID L HICKMAN | 2 00 | | | | | | | | | |
| | 2 00 | х | | | | | | 14,569 | 0 | 2,692 |
| DIRECTOR (9) EVELYN H JANNEY | 2 00 | | | | \vdash | | | | | |
| | 2 00 | х | | | | | | 12,797 | 0 | 4,497 |
| DIRECTOR (10) JORDAN M JENKINS JR | 2 00 | | | | | | | | | |
| | 2 00 | х | | | | | | 145 | 0 | 18,927 |
| DIRECTOR (11) GORDON R METZ JR | 2.00 | | | | _ | | | | | |
| | 2 00 | x | | | | | | 11,251 | 0 | 6,147 |
| DIRECTOR (12) ROBERT J MILLS JR | 2.00 | | | | _ | | | | | |
| | 2 00 | x | | | | | | 14,704 | 0 | 2,319 |
| DIRECTOR (13) STEPHEN L SAUFLEY | 2.00 | | | | | | | | | |
| | 2 00 | × | | | | | | 14,524 | 0 | 2,687 |
| DIRECTOR (14) PICHARD I CHTHERIAND | | | | | _ | | | | | |
| (14) RICHARD L SUTHERLAND | 2 00 | × | | | | | | 15,860 | 0 | C |
| DIRECTOR (15) H. CARL TINDER CR | | | | _ | \vdash | | | | | |
| (15) H CARL TINDER SR | 2 00 | x | | | | | | 14,881 | 0 | C |
| DIRECTOR (4.6) PETER A TRUPAN | | | | | | | | | | |
| (16) PETER A TRUBAN | 2 00 | × | | | | | | 4,394 | 0 | 13,338 |
| DIRECTOR | | | | | <u> </u> | | | , - 1 | | , |
| (17) WILLIAM E WALTON | 2 00 | × | | | | | | 10,824 | 0 | 6,244 |
| | | | | | | | | | | |

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 | more pers | than on is | one bot | note boo | chec x, unle n offic rustee | ess er | (D) Reportable compensation from the organization | (E) Reportable compensation from relate organization | on d ns | (F Estim amount o compen from | ated of other sation the |
|---------------------|--|---|-----------------------------------|-----------------------|------------|--------------|--------------------------------------|-----------|---|--|----------------|---|-----------------------------------|
| | | 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) |) - | organiz | lated |
| (18) WIL | LIAM F OSL JR | 2 00 | x | | | | | | 2,932 | | 0 | | 0 |
| DIRECTO | | 40.00 | | | | | | | | | | | |
| , , | IATHAN S SHOUSE | 40 00 | | | × | | | | 140,632 | | 0 | | 16,971 |
| SECRETA (20) 1FF | RRY FREY W DILLON | 4 00 | | | | | | | | | | | |
| TREASUR | | | | | x | | | | 0 | | 0 | | 0 |
| | /ID A PRIDDY | 4 00 | | | | | | | | | | | |
| ASST TR | REASURER | | | | × | | | | 0 | | 0 | | 0 |
| | GGY L MCCLELLAND | 4 00 | | | | | | | | | | | |
| ASST TR | REASURER | | | | X | | | | 0 | | 0 | | 0 |
| (23) J C | LAY FRANCIS | 40 00 | | | | | , | | 160.007 | | | | 10.460 |
| HIGHEST | COMPENSATED EMPLOY | | | | | | Х | | 160,097 | | 0 | | 18,469 |
| (24) MAI | RTHA A MOORE | 40 00 | | | | | х | | 144,794 | | 0 | | 19,411 |
| HIGHEST | COMPENSATED EMPLOY | | | | | | _ ^ | | 144,734 | | | | 19,711 |
| (25) GRI | EGORY K HICKS | 40 00 | | | | | l x | | 142,368 | | o | | 9,432 |
| | COMPENSATED EMPLOY | | | | | | ļ | | | | Ĭ | | |
| (26) AR | CHIE B ATWELL | 0 00 | | | | | | x | 26,202 | | 0 | | 0 |
| | DIRECTOR | | | | | | | | · | | | | |
| (27) EDV | WARD A SCHARER | 0 00 | | | | | | x | 12,876 | | 0 | | 1,735 |
| FORMER | OFFICER/DIRECTOR | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | Sub-Total | | | | | | <u> </u> | | | | | | |
| | otal from continuation sheets to Part | VII, Section A | | • | • | | | | | | _ | | |
| | | | • | | • | | <u> </u> | | 1,102,660 | | 0 | | 194,590 |
| | otal number of individuals (including b 100,000 of reportable compensation | | | | ed a | bove | e) who | rec | eived more than | | | | |
| | | | | | | | | | | | | Yes | No |
| | old the organization list any former offi n line 1a? <i>If "Yes," complete Schedule J</i> | | | | y em | nplo • | yee, o | r hıç | ghest compensate | d employee | 3 | Yes | |
| 0 | or any individual listed on line 1a, is the granization and related organizations of the state o | | | | | | | | | om the | | | |
| | ndividual | | | • | • | • | • | • | | | 4 | Yes | |
| | rid any person listed on line 1a receive ervices rendered to the organization? | | | | | | | | | | 5 | | No |

Section B. Independent Contractors

1 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.

| (B) | (C) |
|-------------------------|---|
| Description of services | Compensation |
| FINANCIAL AUDITING | 195,400 |
| CONSULTING | 175,508 |
| HAULING GRAIN | 117,723 |
| HAULING GRAIN | 100,520 |
| | |
| | Description of services FINANCIAL AUDITING CONSULTING HAULING GRAIN |

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 ►4

| Part \ | /1111 | Statement o | | | | | | |
|---|-------|---|---------------------------------------|-------------------------|-------------------|--|---|--|
| | | Check If Schedi | ule O contains a respo | nse or note to any lir | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512-514 |
| w 92 | 1a | Federated cam | paigns 1a | | | | | |
| Contributions, Gifts, Grants and Other Similar Amounts | ь | Membership du | es 1b | | | | | |
| Gra | c | Fundraising eve | ents 1c | | | | | |
| . ₹ | | | | | | | | |
| Gif ilar | d | | zations 1d | | | | | |
| E. S | е | Government grant | s (contributions) 1e | | | | | |
| ii S | f | All other contribute | ons, gifts, grants, and 1f | | | İ | | |
| a a | _ | | ons included in lines | | | | | |
| r di | g | 1a-1f \$ | ons meladed in inies | | | | | |
| G G | h | Total. Add lines | s 1a-1f | | | | | |
| | | | | Business Code | | | | |
| Program Serwoe Revenue | 2a | MEMBERSHIP DUE | S | 110000 | 2,711,394 | 2,711,394 | | |
| 188 184 | ь | | _ | | | | | |
| ě. | _ c | | | | | | | |
| ž | d | | | | | | | |
| Ž, | e | | | | | | | |
| E E | f f | All other progra | am service revenue | | | | | |
| ွိ | | | | | | | | |
| | g | | s 2a – 2f | | 2,711,394 | | | |
| | 3 | | ome (including dividen ar amounts) | | 4,804,499 | | | 4,804,499 |
| | 4 | | stment of tax-exempt bond | | | | | |
| | 5 | Royalties | | ▶ │ | 1,983,072 | | | 1,983,072 |
| | | | (ı) Real | (II) Personal | | | | |
| | 6a | Gross rents | 1,115,777 | | | | | |
| | Ь | Less rental expenses | 179,097 | | | | | |
| | c | Rental income | 936,680 | | | | | |
| | d | or (loss) Net rental inco | me or (loss) | | 936,680 | | 936,680 | |
| | | | (ı) Securities | (II) Other | | | | |
| | 7a | Gross amount from sales of assets other than inventory | 3,404,900 | | | | | |
| | ь | Less cost or | 3,497,072 | | | | | |
| | | other basis and sales expenses | | | | | | |
| | C | Gain or (loss) | -92,172 | | | | | |
| | d | Net gain or (los | | | -92,172 | | | -92,172 |
| Other Revenue | 8a | Gross income f events (not inc \$ | luding s reported on line 1c) | | | | | |
| ē | ь | Less directles | penses b | | | | | |
| 5 | c | | (loss) from fundraising | | | | | |
| | 9a | | rom gaming activities ne 19 a | | | | | |
| | ь | less directev | penses b | | | | | |
| | | | (loss) from gaming acti | | | | | |
| | | Gross sales of | | | | | | |
| | | returns and allo | | | | | | |
| | _ | | a | | | | | |
| | b | | oods sold b | | | | | |
| | | Net income or (| (loss) from sales of inv | entory | | | | |
| | 11a | | | Business Code 110000 | 142,170 | | | 142,170 |
| | l . | MISCELLANEC | | 541800 | 53,488 | | 53,488 | |
| | b | ADVERTISING | INCOME | 341000 | 33,700 | | | |
| | C | Λ II -+ | | | | | | |
| | a | | ue | | | | | |
| | e | | s 11a-11d | | 195,658 | | | |
| | 12 | Total revenue. | See Instructions . | 🕨 | 10,539,131 | 2,711,394 | 990,168 | 6,837,569 |

| Part IX | Statement of Functional Expenses | |
|-------------|---|--|
| Section 501 | .(c)(3) and 501(c)(4) organizations must complete all columns | All other organizations must complete column (A) |

| | Check if Schedule O contains a response or note to any line in this | Part IX | | | <u> </u> |
|----|--|-----------------------|---|-------------------------------------|---------------------------------------|
| | ot include amounts reported on lines 6b, b, 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 | 155,656 | • | | <u> </u> |
| 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 | 681,262 | | | |
| 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 | 4,596,774 | | | |
| 8 | Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | -200,335 | | | |
| 9 | Other employee benefits | 293,139 | | | _ |
| 10 | Payroll taxes | 267,327 | | | |
| 11 | Fees for services (non-employees) | | | | |
| а | Management | | | | |
| b | Legal | 13,940 | | | |
| С | Accounting | 32,631 | | | |
| d | Lobbying | | | | |
| е | 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) | | | | |
| 12 | Advertising and promotion | 230,128 | | | |
| 13 | Office expenses | 437,127 | | | |
| 14 | Information technology | 278,352 | | | |
| 15 | Royalties | | | | |
| 16 | Occupancy | 396,825 | | | |
| 17 | Travel | 386,978 | | | |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials | 3,772 | | | |
| 19 | Conferences, conventions, and meetings | 331,461 | | | |
| 20 | Interest | 34,132 | | | |
| 21 | Payments to affiliates | 537,668 | | | |
| 22 | Depreciation, depletion, and amortization | 108,989 | | | |
| 23 | Insurance | 32,874 | | | |
| 24 | 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 | 184,674 | | | |
| b | PROPERTY & OTHER TAXES | 39,408 | | | |
| c | RADIO AND RECORDING | 28,105 | | | |
| d | DUES AND SUBSCRIPTIONS | 18,685 | | | |
| е | | 25,524 | | | |
| 25 | Total functional expenses. Add lines 1 through 24e | 8,915,096 | | | |
| 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

| 1 | Par | 't X | Balance Sheet Check if Schedule O contains a response or note to any line in this Part X | | | _ |
|---|----------|------|---|------------|-----|------------|
| 1 Cash-monimiterest-bearing \$37,975 1 2,005,709 2 Savings and temporary cash investments 2,038,881 2 3 3 3 Pledges and grents receivable, net 305,000 4 302,177 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schodule L 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958/6/12), persons described in section 4958/6/12(3)(8), and contributing employers and sponsoring organizations of section 50 1(x)(9) voluntary employees beneficiary organizations (see instructions) Complete Part II of Schodule L 6 7 Notes and loans receivable, net 7 7 7 7 7 7 7 7 7 | | | eneck if Senedale 6 contains a response of note to any line in this Farex 1. 1. | (A) | • | |
| 2 Savings and temporary cash investments 2,335,881 2 225,007 | | 1 | Cash-non-interest-bearing | | 1 | |
| 4 Accounts receivable, net 366.566 4 302,177 | | 2 | Savings and temporary cash investments | 2,535,881 | 2 | 225,087 |
| 4 | | 3 | Pledges and grants receivable, net | | 3 | |
| ## September Se | | 4 | | 395,985 | 4 | 382,177 |
| 1 | | 5 | Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of | | _ | |
| 9 Prepaid expenses and deferred charges 77,4916 9 777,4916 10a Land, buildings, and equipment cost or other basis Complete 10a 1,897,870 10b 16,99,444 456,875 10c 278,426 11 Investments—publicly traded securities 10a 1,897,870 11 16,455,152 12 Investments—publicly traded securities 13 Investments—publicly traded securities 13 Investments—program-related See Part IV, line 11 13 14 Intengible assets 14 15 15 Other assets See Part IV, line 11 18,007,970 14 18,007,970 15 27,317,343 16 Total assets Add lines 1 through 15 (must equal line 34) 40,446,695 16 49,365,730 17 49,426,371 18 Grants payable 1,406,787 19 1,291,683 19 Deferred revenue 1,406,787 19 1,291,6 | s | 6 | 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 | | _ | |
| 9 Prepaid expenses and deferred charges 77,4916 9 777,4916 10a Land, buildings, and equipment cost or other basis Complete 10a 1,897,870 10b 16,99,444 456,875 10c 278,426 11 Investments—publicly traded securities 10a 1,897,870 11 16,455,152 12 Investments—publicly traded securities 13 Investments—publicly traded securities 13 Investments—program-related See Part IV, line 11 13 14 Intengible assets 14 15 15 Other assets See Part IV, line 11 18,007,970 14 18,007,970 15 27,317,343 16 Total assets Add lines 1 through 15 (must equal line 34) 40,446,695 16 49,365,730 17 49,426,371 18 Grants payable 1,406,787 19 1,291,683 19 Deferred revenue 1,406,787 19 1,291,6 | 9 | | | | | |
| 9 Prepaid expenses and deferred charges 77,4916 9 777,4916 10a Land, buildings, and equipment cost or other basis Complete 10a 1,897,870 10b 16,99,444 456,875 10c 278,426 11 Investments—publicly traded securities 10a 1,897,870 11 16,455,152 12 Investments—publicly traded securities 13 Investments—publicly traded securities 13 Investments—program-related See Part IV, line 11 13 14 Intengible assets 14 15 15 Other assets See Part IV, line 11 18,007,970 14 18,007,970 15 27,317,343 16 Total assets Add lines 1 through 15 (must equal line 34) 40,446,695 16 49,365,730 17 49,426,371 18 Grants payable 1,406,787 19 1,291,683 19 Deferred revenue 1,406,787 19 1,291,6 | 4 | | | | | |
| 10s | _ | | | | | |
| Part VI of Schedule D 100 1.887,870 100 1.887,870 100 1.887,870 100 1.887,870 100 1.887,870 100 1.888,875 100 278,428 110 1.889,5875 111 1.845,152 12 1.788,875 12 1.788,875 12 1.788,875 12 1.788,875 12 1.788,875 13 1.881,146 12 1.788,875 13 1.788,875 13 1.881,146 12 1.788,875 13 1.881,146 13 | | - | | 74,916 | 9 | 77,948 |
| 11 Investments—publicly traded securities 15,985,967 11 16,455,152 12 Investments—other securities See Part IV, line 11 1,801,146 12 1,703,858 13 Investments—other securities See Part IV, line 11 1,801,146 12 1,703,858 13 Intangible assets 14 15 Other assets See Part IV, line 11 18,657,900 15 27,317,434 16 Total assets. Add lines 1 through 15 (must equal line 34) 40,446,666 16 49,365,760 17 Accounts payable and accrued expenses 2,965,309 17 4,942,637 18 Grants payable 18 Grants payable 18 19 Deferred revenue 1,406,797 19 1,291,683 19 Deferred revenue 1,406,797 19 1,291,683 10 12 Escrow or custodial account liability Complete Part IV of Schedule D 21 | | 10a | Part VI of Schedule D 1,887,870 | | | |
| 12 Investments—other securities See Part IV, line 11 1,801,146 12 1,703,858 13 Investments—program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 18,857,900 15 27,317,343 16 Total assets. Add lines 1 through 15 (must equal line 34) 40,446,665 16 49,365,760 17 4,942,637 18 Grants payable and accrued expenses 2,956,309 17 4,942,637 18 Grants payable 18 19 Deferred revenue 1,406,797 19 1,291,683 19 Deferred revenue 21 Demonstrated there part IV of Schedule D 21 Demonstrated there part IV of Schedule D 22 Demonstrated there part IV of Schedule D 24 Demonstrated there part IV of Schedule D 3,626,306 25 3,275,679 26 Total liabilities, Add lines 17 through 25 17,257,195 26 21,790,248 27 Demonstrated here assets 27 Demonstrated here assets 27 Demonstrated here assets 29 Demon | | b | Less accumulated depreciation 10b 1,609,444 | 456,875 | 10c | 278,426 |
| 13 | | 11 | | 15,985,967 | 11 | 16,455,152 |
| 14 | | 12 | Investments—other securities See Part IV, line 11 | 1,801,146 | 12 | 1,703,858 |
| 15 | | 13 | Investments—program-related See Part IV, line 11 | | 13 | |
| Total assets. Add lines 1 through 15 (must equal line 34) 40,446,665 16 49,365,760 17 4,942,637 18 47,942,637 19 47,9 | | 14 | Intangible assets | | 14 | |
| 17 | | 15 | Other assets See Part IV, line 11 | 18,657,920 | 15 | 27,317,343 |
| 18 Grants payable 18 18 19 Deferred revenue 1,291,683 1,406,797 19 1,291,683 20 Tax-exempt bond liabilities 20 20 20 20 20 20 20 2 | | 16 | Total assets. Add lines 1 through 15 (must equal line 34) | 40,446,665 | 16 | 49,365,760 |
| Page 19 Deferred revenue | | 17 | Accounts payable and accrued expenses | 2,956,309 | 17 | 4,942,637 |
| 20 Tax-exempt bond liabilities | | 18 | Grants payable | | 18 | |
| 21 Escrow or custodial account liability Complete Part IV of Schedule D | | 19 | Deferred revenue | 1,406,797 | 19 | 1,291,683 |
| Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L | | 20 | Tax-exempt bond liabilities | | 20 | |
| 24 Unsecured notes and loans payable to unrelated third parties | ø. | 21 | Escrow or custodial account liability $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$ | | 21 | |
| 24 Unsecured notes and loans payable to unrelated third parties | iiitie | 22 | | | | |
| 24 Unsecured notes and loans payable to unrelated third parties | ф | | persons Complete Part II of Schedule L | | 22 | |
| 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D | | 23 | Secured mortgages and notes payable to unrelated third parties | 9,267,783 | 23 | 12,280,249 |
| and other liabilities not included on lines 17-24) Complete Part X of Schedule D | | 24 | Unsecured notes and loans payable to unrelated third parties | | 24 | |
| 26 Total liabilities. Add lines 17 through 25 | | 25 | and other liabilities not included on lines 17-24) Complete Part X of Schedule | 2 222 222 | | 0.075.070 |
| Organizations that follow SFAS 117 (ASC 958), check here in and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets | | | | · · · · | | |
| lines 27 through 29, and lines 33 and 34. 27 | | 26 | | 17,257,195 | 26 | 21,790,248 |
| complete lines 30 through 34. 30 Capital stock or trust principal, or current funds | S) | | • | | | |
| complete lines 30 through 34. 30 Capital stock or trust principal, or current funds | ĕ | 27 | - · | | 27 | |
| complete lines 30 through 34. 30 Capital stock or trust principal, or current funds | <u>छ</u> | | | | | |
| complete lines 30 through 34. 30 Capital stock or trust principal, or current funds | <u> </u> | | | | | |
| complete lines 30 through 34. 30 Capital stock or trust principal, or current funds | ŭ | 23 | · | | 29 | |
| 30 Capital stock or trust principal, or current funds 11,391,840 30 14,796,696 31 Paid-in or capital surplus, or land, building or equipment fund 11,790,724 31 12,746,857 32 Retained earnings, endowment, accumulated income, or other funds 6,906 32 31,959 33 Total net assets or fund balances 23,189,470 33 27,575,512 | <u> </u> | | | | | |
| 31 Paid-in or capital surplus, or land, building or equipment fund 11,790,724 31 12,746,857 32 Retained earnings, endowment, accumulated income, or other funds 6,906 32 31,959 33 Total net assets or fund balances 23,189,470 33 27,575,512 | | 30 | | 11,391,840 | 30 | 14,796,696 |
| 33 Total net assets or fund balances | Ą. | | | 11,790,724 | 31 | 12,746,857 |
| 33 Total net assets or fund balances | 455 | | | | | |
| 34 Total liabilities and net assets/fund balances | | 33 | - | 23,189,470 | 33 | 27,575,512 |
| | Z | 34 | Total liabilities and net assets/fund balances | 40,446,665 | 34 | 49,365,760 |

| Pai | Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI | | | | ୮ |
|-----|--|---------|--------------|------|---------|
| | | | | | |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | | 10,5 | 539,131 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | | 8,9 | 915,096 |
| 3 | Revenue less expenses Subtract line 2 from line 1 | 3 | | | 524,035 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | | | 189,470 |
| 5 | Net unrealized gains (losses) on investments | 5 | | | 762,007 |
| 6 | Donated services and use of facilities | 6 | | | |
| 7 | Investment expenses | 7 | | | |
| 8 | Prior period adjustments | 8 | | | |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | 9 | | | 0 |
| 10 | Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) | 10 | | 27,5 | 575,512 |
| Par | t XII Financial Statements and Reporting | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | | | | . ᅜ |
| | | | | Yes | No |
| 1 | Accounting method used to prepare the Form 990 | | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | 2a | | Νo |
| | If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both | wed o | n | | |
| | 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 sepa basis, consolidated basis, or both | rate | | | |
| | ☐ Separate basis ☐ Both consolidated and separate basis | | | | |
| c | If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant? | t of th | ne 2c | Yes | |
| | If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O | 1 | | | |
| За | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? | 9 | 3a | | No |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits | | 3b | | |

DLN: 93493281005134

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

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

► See separate instructions. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

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-FZ, Part V, line 35c (Proxy Tax), then

| | me of the organization GINIA FARM BUREAU FEDERATION | | | E | mployer ider | ntification number |
|-----|--|---|--|-----------------------------------|--|--|
| | | | | | 4-0419002 | |
| Par | t I-A Complete if the or | ganization is exempt under | section 501(| c) or is a s | ection 527 | 7 organization. |
| 1 | Provide a description of the org | ganızatıon's dırect and ındırect politic | cal campaign act | ıvıtıes ın Part | IV | |
| 2 | Political expenditures | | | | . | \$ |
| 3 | Volunteer hours | | | | | |
| Par | t I-B Complete if the or | ganization is exempt under | section 501(| c)(3). | | |
| 1 | Enter the amount of any excise | e tax incurred by the organization und | der section 4955 | i | - | \$ |
| 2 | Enter the amount of any excise | e tax incurred by organization manag | ers under sectior | n 4955 | F | \$ |
| 3 | If the organization incurred a s | ection 4955 tax, did it file Form 472 | O for this year? | | | ┌ Yes ┌ No |
| 4a | Was a correction made? | | | | | ┌ Yes ┌ No |
| b | If "Yes," describe in Part IV | | | | | |
| Par | t I-C Complete if the or | ganization is exempt under | section 501(| c), except | section 50 |)1(c)(3). |
| 1 | Enter the amount directly expe | ended by the filing organization for se | ction 527 exemp | ot function act | ivities 🕨 | \$ |
| 2 | Enter the amount of the filing o exempt function activities | rganızatıon's funds contributed to ot | her organizations | s for section 5 | 27 ▶ | \$ |
| 3 | Total exempt function expendit | tures Add lines 1 and 2 Enter here a | and on Form 112 | 0-POL, line 1 | 7b ► | ¢ |
| 4 | Did the filing organization file F | Form 1120-POL for this year? | | | | ↑ Yes No |
| 5 | organization made payments F amount of political contribution | nd employer identification number (E) For each organization listed, enter the ns received that were promptly and d political action committee (PAC) If | e amount paid fro irectly delivered | om the filing of to a separate | rganızatıon's political orga | funds Also enter the anization, such as a |
| | (a) Name | (b) Address | (c) EIN | filing org | nt paid from anization's ne, enter -0- | (e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0- |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

| Sch | nedule C (Form 990 or 990-EZ) 2013 | | | | | Page 2 |
|-----|---|---------------------------|----------------------------------|-----------------------------|--|-------------------------------------|
| Pä | art II-A Complete if the organization | is exempt under | section 501(| c)(3) and file | ed Form 5768 | |
| _ | under section 501(h)). | | Link in Doub TV an | - h - 66:1: - h - d | | a adduces FIN |
| ٠. | Check ► If the filing organization belongs to a expenses, and share of excess lobb | | iist in Part IV ea | ch amiliated gro | up members nam | e, address, EIN, |
| 3 | Check ► ☐ If the filing organization checked bo | | l" provisions app | ly | | |
| | Limits on Lobbying E (The term "expenditures" means ar | | l .) | | (a) Filing organization's totals | (b) Affiliated group totals |
| La | Total lobbying expenditures to influence public o | pinion (grass roots lob | bying) | | | |
| ь | Total lobbying expenditures to influence a legisl | ative body (direct lobby | yıng) | | | |
| c | Total lobbying expenditures (add lines 1a and 1 | o) | | Γ | | |
| d | O ther exempt purpose expenditures | | | Γ | | |
| e | Total exempt purpose expenditures (add lines 1 | c and 1d) | | | | |
| f | Lobbying nontaxable amount Enter the amount is columns | 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 lir | ne 1e | | | |
| | Over \$500,000 but not over \$1,000,000 | \$100,000 plus 15% of the | e excess over \$500,0 | 00 | | |
| | Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the | e excess over \$1,000 | ,000 | | |
| | Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus 5% of the | excess over \$1,500,0 | 000 | | |
| | Over \$17,000,000 | \$1,000,000 | | | | |
| g | Grassroots nontaxable amount (enter 25% of lir | ue 1f) | | | | |
| h | Subtract line 1g from line 1a If zero or less, ent | er-0- | | | | |
| i | Subtract line 1f from line 1c If zero or less, ente | er - 0 - | | | | |
| j | If there is an amount other than zero on either li section 4911 tax for this year? | ne 1h or line 1ı, did the | organization file | Form 4720 repo | orting | ┌ Yes ┌ No |
| | (Some organizations that made a columns below. See t | he instructions fo | ection do not r lines 2a thro | havè to con ough 2f on p | | ne five |
| | Lobbying Exp | enditures During | 4-Year Avera ⊤ | ging Period | 1 | 1 |
| | Calendar year (or fiscal year beginning in) | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) Total |
| 2a | Lobbying nontaxable amount | | | | | |
| b | Lobbying ceiling amount (150% of line 2a, column(e)) | | | | | |
| C | Total lobbying expenditures | | | | | |
| d | Grassroots nontaxable amount | | | | | |

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

Grassroots lobbying expenditures

| | and "Was" was a see to be a fact to be seen to be seen to be seen to be a seen to be seen as the seen as | (a | 1) | (b) |) |
|--------------|--|-------------------|---------|-------------|-------|
| | ach "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying ity. | Yes | No | Amo | unt |
| L | During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of | | | | |
| a | Volunteers? | | | | |
| b | Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? | | | | |
| : : | Media advertisements? | | | | |
| e | Mailings to members, legislators, or the public? Publications, or published or broadcast statements? | | | | |
| | Grants to other organizations for lobbying purposes? | | | | |
| | Direct contact with legislators, their staffs, government officials, or a legislative body? | | | | |
|) 1 | Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? | | | | |
| • | Other activities? | | | | |
| | Total Add lines 1c through 1i | | | | |
| ı | Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | | | | |
| , | If "Yes," enter the amount of any tax incurred under section 4912 | | | | |
| - | If "Yes," enter the amount of any tax incurred by organization managers under section 4912 | | | | |
| | If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | | | | |
| | t III-A Complete if the organization is exempt under section 501(c)(4), section ! | 501(c |)(5), c | r secti | on |
| _ | 501(c)(6). | | | | |
| | Were substantially all (90% or more) dues received nondeductible by members? | | | 1 Yes | - |
| | Did the organization make only in-house lobbying expenditures of \$2,000 or less? | | ⊢ | 2 | - |
| | Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? | | ⊢ | 3 | + |
| Ŧ | t III-B Complete if the organization is exempt under section 501(c)(4), section 5 | 501/6 | \(5\) c | | |
| : . | 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes." | | | | |
| | Dues, assessments and similar amounts from members | 1 | | | |
| | Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). | | | | |
| | Current year | 2a | | | |
| 1 | | | | | |
| | Carryover from last year | 2b | | | |
| • | Total | 2c | | | |
|) | Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues | \vdash | | | |
| 2 | Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess | 2c | | | |
| b | Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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 | 2c | | | |
| : | Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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? | 2c 3 | | | |
| b c | Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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? Taxable amount of lobbying and political expenditures (see instructions) | 2c 3 | | | |
| rc | Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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? Taxable amount of lobbying and political expenditures (see instructions) art IV Supplemental Information Evident to Supplemental Information (affiliated ground the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated ground the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated ground the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated ground the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated ground the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated ground the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated ground the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated ground the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated ground the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated ground the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A, line 1, Part I-B, line 4, Part I-C, line 5, Par | 2c 3 4 5 | Part II | -A, line 2 | 2, an |
| b c Pa | Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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? Taxable amount of lobbying and political expenditures (see instructions) art IV Supplemental Information | 2c 3 4 5 | Part II | -A , line 2 | 2, an |
| b c Pa | Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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? Taxable amount of lobbying and political expenditures (see instructions) art IV Supplemental Information Evide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated ground in the part II-B, line 1 Also, complete this part for any additional information | 2c 3 4 5 | Part II | -A, line 2 | 2, an |
| Pa | Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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? Taxable amount of lobbying and political expenditures (see instructions) art IV Supplemental Information Evide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated ground in the part II-B, line 1, Also, complete this part for any additional information | 2c 3 4 5 | Part II | -A, line 2 | 2, an |
| o ro | Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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? Taxable amount of lobbying and political expenditures (see instructions) art IV Supplemental Information Evide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated ground in the part II-B, line 1, Also, complete this part for any additional information | 2c 3 4 5 | Part II | -A , line 2 | 2, ar |

| 201104410 0 (101111 330 01 330 12) 2013 | | 1 age - | | | | |
|---|-----------------------|---------|--|--|--|--|
| Part IV Supplemental Information | on <i>(continued)</i> | | | | | |
| Return Reference | Explanation | | | | | |
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Schedule D (Form 990) 2013

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

DLN: 93493281005134

OMB No 1545-0047

SCHEDULE D (Form 990)

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

> Open to Public Inspection

Department of the Treasury Internal Revenue Service

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ▶ Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

| | me of the organization GINIA FARM BUREAU FEDERATION | | Emp | loyer identificat | ion numbe | r |
|--------|---|--|----------|------------------------|-------------|----------|
| VIK | GINIA FARM DUREAU FEDERALIUN | | 54-0 | 0419002 | | |
| Pa | rt I Organizations Maintaining Donor Adv | | unds | or Accounts. | Complet | e if the |
| | organization answered "Yes" to Form 990 | (a) Donor advised funds | T | (b) Funds and ot | heraccou | nts |
| 1 | Total number at end of year | (a) Bonor advised rands | | (b) I unus unu oc | .iici decou | 1103 |
| 2 | Aggregate contributions to (during year) | | | | | |
| 3 | Aggregate grants from (during year) | | | | | |
| 4 | Aggregate value at end of year | | | | | |
| 5 | Did the organization inform all donors and donor advise funds are the organization's property, subject to the or | | or advi | ısed | ☐ Yes | |
| 6 | Did the organization inform all grantees, donors, and dused only for charitable purposes and not for the benefit | onor advisors in writing that grant funds | | | _ | _ |
| | conferring impermissible private benefit? | | | | Yes | No |
| Pai | rt II Conservation Easements. Complete if | the organization answered "Yes" to | o Forn | <u>n 990, Part IV,</u> | line 7. | |
| 1 2 | Purpose(s) of conservation easements held by the org Preservation 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 c | ertifie | d historic structi | ıre | |
| _ | easement on the last day of the tax year | a quanned conservation contribution in t | | Held at the E | | Vear |
| а | Total number of conservation easements | | 2a | rield dt tile L | ind of the | Tear |
| b | Total acreage restricted by conservation easements | | 2b | | | |
| c | Number of conservation easements on a certified histo | oric structure included in (a) | 2c | | | |
| d | Number of conservation easements included in (c) acc historic structure listed in the National Register | ` ′ | 2d | | | |
| 3 | Number of conservation easements modified, transfer the tax year ▶ | red, released, extinguished, or terminate | d by th | ne organization d | urıng | |
| 4 | Number of states where property subject to conservat | ion easement is located ► | | | | |
| 5 | Does the organization have a written policy regarding tenforcement of the conservation easements it holds? | the periodic monitoring, inspection, hand | dling of | violations, and | ┌ Yes | ┌ No |
| 6 | Staff and volunteer hours devoted to monitoring, inspe | cting, and enforcing conservation easen | nents c | during the year | | |
| 7 | A mount of expenses incurred in monitoring, inspecting | and enforcing conservation easements | s durin | a the vear | | |
| / | ► \$ | y, and emoreing conservation casements | , aann | g the year | | |
| В | Does each conservation easement reported on line 2(and section 170(h)(4)(B)(ii)? | d) above satisfy the requirements of sec | tion 17 | 70(h)(4)(B)(ı) | ┌ Yes | ┌ No |
| 9 | In Part XIII, describe how the organization reports colbalance sheet, and include, if applicable, the text of the organization's accounting for conservation easeme | e footnote to the organization's financial | | | | |
| Par | Organizations Maintaining Collection Complete if the organization answered "Y | | or Ot | her Similar A | ssets. | |
| 1a | If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide, in Part XIII, the text of the footnote to | ts held for public exhibition, education, | or rese | arch in furtheran | | |
| b | If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide the following amounts relating to thes | ts held for public exhibition, education, | | | | ıc |
| | (i) Revenues included in Form 990, Part VIII, line 1 | | | ► \$ | | |
| | (ii) Assets included in Form 990, Part X | | | \$ | | |
| 2 | If the organization received or held works of art, histor following amounts required to be reported under SFAS | | r finan | | | |

Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

| Par | Tit Organizations Maintaining Co | illections of Art, H | <u>ıstorı</u> | <u>cal Tre</u> | asu | <u>res, or Oth</u> | <u>1er</u> | Similar A | \sse | ts (co | <u>ntınued)</u> |
|-----------|--|--------------------------|-------------------|----------------|---------------|---|----------------|------------------------------|----------|-----------------|-----------------|
| 3 | Using the organization's acquisition, access collection items (check all that apply) | ion, and other records, | check | any of th | e follo | owing that are | eas | ıgnıfıcant u | se of | its | |
| а | Public exhibition | d | Г | Loan o | r exch | nange program | ms | | | | |
| b | Scholarly research | e | Γ | Other | | | | | | | |
| c | Preservation for future generations | | | | | | | | | | |
| 4 | Provide a description of the organization's c Part XIII | ollections and explain h | ow the | y further | the o | rganızatıon's | exe | mpt purpos | e ın | | |
| 5 | During the year, did the organization solicit | | | | | | ımıl | ar | _ | | _ |
| | assets to be sold to raise funds rather than | | | | | | II) (| " - | <u> </u> | | No |
| Par | Part IV, line 9, or reported an ar | | | | | answered | "Yes | s" to Form | 990 | , | |
| 1a | Is the organization an agent, trustee, custod included on Form 990, Part X? | lian or other intermedia | ry for c | ontributi | ions o | r other asset | s no | t | Γ, | es (| ┌ No |
| b | If "Yes," explain the arrangement in Part XI | II and complete the foll | owing 1 | able | | | | | | | |
| | | | | | | | + | | Amou | nt | |
| c | Beginning balance | | | | | 1 | + | | | | |
| d | Additions during the year | | | | | 10 | d | | | | |
| е | Distributions during the year | | | | | 10 | e | | | | |
| f | Ending balance | | | | | 1 | f | | | | |
| 2a | Did the organization include an amount on F | orm 990, Part X, line 21 | ۲, | | | | | | Γ, | es/ | ┌ No |
| b | If "Yes," explain the arrangement in Part XI | II Check here if the ex | planatı | on has b | een p | rovided in Pa | rt XI | II | | | Γ |
| Pa | rt V Endowment Funds. Complete | | | | | | | | | | |
| | | (a)Current year (| (b) Prior | year L | (c) Tv | vo years back (| (d) Th | ree years bac | k (e) | Four ye | ars 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 cur | rent year end balance (1 | lıne 1g | , column | (a)) h | neld as | | | | | |
| а | Board designated or quasi-endowment 🕨 | | | | | | | | | | |
| ь | Permanent endowment ▶ | | | | | | | | | | |
| С | Temporarily restricted endowment ▶ | | | | | | | | | | |
| | The percentages in lines 2a, 2b, and 2c sho | uld equal 100% | | | | | | | | | |
| За | Are there endowment funds not in the posse | ssion of the organizatio | n that | are held | and a | dmınıstered f | or th | ie | | | |
| | organization by | - | | | | | | _ | | Yes | No |
| | (i) unrelated organizations | | | | | | • | | a(i) | | |
| | (ii) related organizations | | | | | | • | 3 | a(ii) | | |
| | If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of the second of the second of the second or the second of the second or the second of the second or the seco | | | | | | • | · · · L | 3b | | |
| 4 Date | t VI Land, Buildings, and Equipme | | | | 3 00 14 | rand 'Vac' | to E | orm 000 | Dart ' | [\/ lie | |
| Par | 11a. See Form 990, Part X, line | | oryar | lization | alisw | refeu fes | to r | JIIII 990, | Part. | LV, III | ie |
| | Description of property | | |) Cost or o | | (b) Cost or oth basis (other) | | (c) Accumula depreciation | | (d) Bo | ok value |
| | _and | | \dashv | | | | | | | | |
| | Buildings | | | | | | - | | | | |
| | _easehold improvements | | | | | | \dashv | | + | | |
| | Equipment | | — | | | | \dashv | | | | |
| | | | ı | | | | - 1 | | ı | | |
| | 7. bb. a. ii | | | 27 | 76,653 | 1,611,2 | 217 | 1,60 | 9,444 | | 278,426 |

| Part VII Investments—Other Securities. Co See Form 990, Part X, line 12. | | - Tunswered Tes to Form | 750, Tare 14, Inte 116. |
|---|------------------------------|--|--------------------------|
| (a) Description of security or category (including name of security) | (b)Book value | (c) Method of valua Cost or end-of-year mai | |
| (1)Financial derivatives | | | |
| (2)Closely-held equity interests | | | |
| Other | | | |
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| Total (Column (b) must equal Form 900, Part V col (P) line 12) | F | | |
| Total. (Column (b) must equal Form 990, Part X, col (B) line 12) Part VIII Investments—Program Related. (| | n answered 'Ves' to Form | OOO Dart IV line 11 |
| See Form 990, Part X, line 13. | complete il the organization | on answered tes to form | 1 990, Part IV, line III |
| (a) Description of investment | (b) Book value | (c) Method of valua | tion |
| | | Cost or end-of-year mar | ket value |
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| Total. (Column (b) must equal Form 990, Part X, col (B) line 13) | * | | |
| Part IX Other Assets. Complete if the organization | | O. Part IV. line 11d. See Forr | n 990. Part X. line 15 |
| (a) Desc | | | (b) Book value |
| (1) DEFERRED LOAN COSTS | | | 23,92 |
| (2) NET INVESTMENT IN DIRECT FINANCING LEASE | | | 13,158,17 |
| (3) DUE FROM AFFILIATES | | | 14,135,24 |
| (-) | | | , , |
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| Total. (Column (b) must equal Form 990, Part X, col.(B) line | 15.) | | 27,317,34 |
| Part X Other Liabilities. Complete if the org | | | |
| Form 990, Part X, line 25. | , | ,, ,, , | |
| 1 (a) Description of liability | (b) Book value | | |
| Federal income taxes | | 1 | |
| ACCRUED POST RETIREMENT BENEFITS | 1,943,487 | 1 | |
| DEFERRED COMPENSATION PAYABLE | 1,038,688 | 1 | |
| DUES PAYABLE | 293,504 | 1 | |
| | 255,504 | 1 | |
| | |] | |
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| | | 4 | |
| | | | |
| Total. (Column (b) must equal Form 990, Part X, col (B) line 25) | ▶ 3,275,679 | 1 | |
| , | 3,273,079 | 4 | |

| Part | | Reconciliation of Re he organization answ | | | | | ts With Revenue | per Re | eturn Complete if |
|------|----------|--|--|--|--|---|--|---|---|
| 1 | | evenue, gains, and other | | | | | | 1 | |
| 2 | A mour | nts included on line 1 but | not on Form 990, Pa | rt VIII, line 12 | | | | | |
| а | Net un | realized gains on investr | ments | | . | 2a | | | |
| b | Donate | ed services and use of fa | cilities | | | 2b | | | |
| c | Recove | eries of prior year grants | | | | 2c | | | |
| d | Other | (Describe in Part XIII) | | | | 2d | | | |
| e | A dd Iır | nes 2a through 2d . | | | | | | 2e | |
| 3 | Subtra | ct line 2e from line 1 . | | | | | | 3 | |
| 4 | A mour | nts included on Form 990 |), Part VIII, line 12, b | out not on line 1 | | | | | |
| а | Invest | ment expenses not inclu | ded on Form 990, Par | rt VIII, line 7b . | | 4a | | | |
| b | Other | (Describe in Part XIII) | | | | 4b | | | |
| c | A dd Iır | nes 4a and 4b | | | | | | 4c | |
| 5 | | evenue Add lines 3 and | | | | | | 5 | |
| Part | | Reconciliation of Ex f the organization ans | | | | | nts With Expense | s per | Return. Complete |
| 1 | | expenses and losses per | | | | | | 1 | |
| 2 | A moun | ts included on line 1 but | not on Form 990, Pai | rt IX, line 25 | | | | | |
| а | Donate | ed services and use of fa | cilities | | . | 2a | | | |
| b | Prior y | ear adjustments | | | . [| 2b | | | |
| С | Otherl | osses | | | | 2c | | | |
| d | Other | (Describe in Part XIII) | | | . [| 2d | | | |
| e | A dd Iın | es 2a through 2d | | | | | | 2e | |
| 3 | Subtra | ct line 2e from line 1 . | | | | | | 3 | |
| 4 | A moun | ts included on Form 990 | , Part IX, line 25, but | t not on line 1: | | | | | |
| а | Invest | ment expenses not inclu | ded on Form 990, Par | rt VIII, line 7b . | . L | 4a | | | |
| b | Other | (Describe in Part XIII) | | | . L | 4b | | _ | |
| С | A dd Iın | es 4a and 4b | | | | | | 4c | |
| 5 | | xpenses Add lines 3 and | | l Form 990, Part I, l | lıne 1 | 8) | | 5 | |
| | | Supplemental Info | | | | | | | |
| Part | | escriptions required for I , Part X, line 2, Part XI, | | | | | | | de any additional |
| | Reti | urn Reference | | Explanation | | | | | |
| PART | X, LINE | | AUTHORITATIVE G JANUARY 1, 2009 T AND STATE JURISD WELL AS ALL OPEN EXAMINATION FOR 2012 AND 2013 TAX AND THERE WAS NO OPERATIONS AS A COMPANY'S POLICY UNCERTAIN TAX BE | GUIDANCE ON ACC THE COMPANY AND DICTIONS WHERE I TAX YEARS IN THI R THE COMPANY'S X YEARS THE COM O EFFECT ON THE RESULT OF IMPLE Y TO RECOGNIZE ENEFITS AS A COM THE FASB'S AUTHO OSITIONS AND AS BT OR PENALTIES A | COUN ALYZ IT IS ESE : FEDE MPAN COM MEN INTE MPON ORITA GOF [| ITING ZED F REQ JURIS ERAL NY DI PAN TING ERES IENT ATIV DECE | ILING POSITIONS I UIRED TO FILE INCO SDICTIONS THE PE AND STATE RETURI D NOT HAVE ANY U Y'S FINANCIAL CON THE AUTHORITATI I AND PENALTIES A OF INCOME TAX EX E GUIDANCE ON ACE MBER 31, 2013 THE | Y IN IN N ALL OME TA RIODS NS ARE NCERT DITIO IVE GU CCRUE CCOUN E COMF | COME TAXES AS OF OF THE FEDERAL AX RETURNS, AS SUBJECT TO THE 2010, 2011, AIN TAX BENEFITS N OR RESULTS OF IDANCE IT IS THE TO ON ANY AS OF THE DATE TING FOR PANY DID NOT HAVE N TAX BENEFITS, |

| | <u> </u> | |
|-----------|-------------------|----------------------|
| Part XIII | Supplemental Info | ormation (continued) |
| Ret | turn Reference | Explanation |
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Schedule D (Form 990) 2013

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Part I General Information on Grants and Assistance

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

Schedule I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

VIRGINIA FARM BUREAU FEDERATION

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

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

Attach to Form 990

► Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

DLN: 93493281005134

2013

Open to Public

Schedule I (Form 990) 2013

Employer identification number

54-0419002

| | | Governments and received | | | | | "Yes" to |
|---|----------------|------------------------------------|-------------------------------------|---|---|--|--------------------------------------|
| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount 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 grar or assistance |
| L) VIRGINIA FFA OUNDATION 660 LITTON REAVES LACKSBURG,VA 24061 | 51-0250911 | 501(C)(3) | 5,000 | | | | GENERAL SUPPORT |
| 2) VIRGINIA TECH OUNDATION 02 PRICES FORK ROAD LACKSBURG, VA 24061 | 54-0721690 | 501(C)(3) | 6,780 | | | | GENERAL SUPPORT |
| B)VARIOUS OTHER HARITABLE ONTRIBUTIONS | | 501(C)(3) | 10,650 | | | | GENERAL SUPPORT |
| | | | | | | | |
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Cat No 50055P

| Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. | | | | | | | |
|---|-------------------------|----------------------------------|-----------------------------------|--|---------------------------------------|--|--|
| (a)Type of grant or assistance | (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 | | |
| | | | | | | | |
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| Part IV | Supplemental Informa | tion. Provide the info | ormation required in Pa | rt I, line 2, Part III, c | olumn (b), and any other a | ddıtıonal ınformatıon. |
|---------|----------------------|------------------------|-------------------------|---------------------------|----------------------------|------------------------|

Return Reference Explanation

Schedule I (Form 990) 2013

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

DLN: 93493281005134

OMB No 1545-0047

Inspection

Open to Public

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

VIRGINIA FARM BÜREAU FEDERATION

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

Compensation Information

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Employer identification number

54-0419002

| Pa | rt I Questions Regarding Compensation | | | | | |
|----|--|----------|---|----|-----|----|
| | | | | | Yes | No |
| 1a | Check the appropriate box(es) if the organization prov 990, Part VII, Section A, line 1a Complete Part III | | | | | |
| | 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 | Γ | Health or social club dues or initiation fees | | | |
| | Discretionary spending account | Г | Personal services (e g , maid, chauffeur, chef) | | | |
| b | If any of the boxes in line 1a are checked, did the org reimbursement or provision of all of the expenses des | | | 1b | | |
| 2 | Did the organization require substantiation prior to redirectors, trustees, officers, including the CEO/Exec | | | 2 | | |
| | | | | | | |
| 3 | Indicate which, if any, of the following the filing organ organization's CEO/Executive Director Check all the used by a related organization to establish compensation | at appl | y Do not check any boxes for methods | | | |
| | 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 990, P or a related organization | art VII | I, Section A, line 1a with respect to the filing organization | | | |
| а | Receive a severance payment or change-of-control p | aymer | nt? | 4a | | Νo |
| b | Participate in, or receive payment from, a supplemen | tal non | nqualified retirement plan? | 4b | Yes | |
| С | Participate in, or receive payment from, an equity-ba | sed co | mpensation arrangement? | 4c | | Νo |
| | If "Yes" to any of lines 4a-c, list the persons and pro | vide th | ne applicable amounts for each item in Part III | | | |
| | Only 501(c)(3) and 501(c)(4) organizations only mus | st com | plete lines 5-9. | | | |
| 5 | For persons listed in Form 990, Part VII, Section A, compensation contingent on the revenues of | | | | | |
| а | The organization? | | | 5a | | |
| | 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 A, compensation contingent on the net earnings of | lıne 1a | a, did the organization pay or accrue any | | | |
| а | The organization? | | | 6a | | |
| b | 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 A, payments not described in lines 5 and 67 If "Yes," de | | | 7 | | |
| 8 | Were any amounts reported in Form 990, Part VII, pa | aid or a | accured pursuant to a contract that was | | | |
| | subject to the initial contract exception described in | | | | | |
| | ın Part III | | | 8 | | |
| 9 | If "Yes" to line 8, did the organization also follow the section 53 $4958\text{-}6(c)^{\gamma}$ | rebutt | 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 of | 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) | 240,946 0 | 51,250 0 | 5,974 0 | 18,723 0 | 9,054 0 | 325,947 0 | 0 0 |
| (2)JONATHAN S SHOUSE SECRETARY | (i) (ii) | 109,624 0 | 20,382 0 | 10,626 0 | 8,439 0 | 8,532 0 | 157,603 0 | 0 |
| (3) CLAY FRANCIS HIGHEST COMPENSATED EMPLOY | (i) (ii) | 131,637 0 | 26,236 0 | 2,224 0 | 9,606 | 8,863 0 | 178,566 0 | 0 |
| (4)MARTHA A MOORE HIGHEST COMPENSATED EMPLOY | (i) (ii) | 118,931 0 | 22,632 0 | 3,231 0 | 8,707 0 | 10,704 | 164,205 | 0 |
| (5)GREGORY K HICKS HIGHEST COMPENSATED EMPLOY | (i) (ii) | 116,941 0 | 21,097 0 | 4,330 0 | 8,166 0 | 1,266 0 | 151,800 | 0 |
| (6)ARCHIE BATWELL FORMER DIRECTOR | (i) (ii) | 26,202 0 | 0 0 | 0 | 0 | 0 | 26,202 0 | 0 |
| (7)EDWARD A SCHARER FORMER OFFICER/DIRECTOR | (i) (ii) | 12,876 0 | 0 | 0 | 1,735 0 | 0 | 14,611 | 0 |

Schedule J (Form 990) 2013

Part III Supplemental Information

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 at | iditional information |
|------------------------------------|---|
| 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 THE BOARD 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 \$17,500 JANICE BURTON \$5,825 EMILY F EDMONDSON \$12,809 MARVIN L EVERETT, JR \$16,015 THOMAS E GRAVES, JR \$3,954 DAVID L HICKMAN \$1,587 EVELYN JANNEY \$3,163 JORDAN M JENKINS, JR \$15,815 GORDON R METZ, JR \$4,759 ROBERT MILLS, JR \$1,602 STEPHEN SAUFLEY \$1,582 PETER TRUBAN \$11,912 WILLIAM E WALTON \$5,336 HENRY E WOOD JR \$12,932 MARTHA MOORE \$13,000 GREG HICKS \$11,050 |

Schedule J (Form 990) 2013

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ALL FARM BUREAUS IN VIRGINIA

As Filed Data -

DLN: 93493281005134

Employer identification number

OMB No 1545-0047

2013

Open to Public
Inspection

SCHEDULE O (Form 990 or 990-EZ)

Name of the organization VIRGINIA FARM BUREAU FEDERATION

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.

Attach to Form 990 or 990-E2

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Return
Reference

FORM 990, PART
VI, SECTION A,
LINE 6

Return
Reference

Explanation

Explanation

Explanation

Explanation

IN VIRGINIA FARM BUREAU FEDERATION HAS 88 MEMBERS THIS IS A FEDERATION OF THE COUNTY FARM BUREAUS AND BOARDS OF DIRECTORS 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

| Return Reference | Explanation |
|--|---|
| FORM 990, PART VI, SECTION A, LINE 7A | 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) |

| Return Reference | Explanation |
|------------------|---|
| , , , | 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 |

| 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 |

| 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 |

| Return Reference | Explanation |
|---|--|
| FORM 990, PART VI, SECTION B, LINE 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 |

| PART VI, RESOURCES SENDS THE BUDGET AND AUDIT COMMITTEE THE PRESIDENT'S CURRENT SALARY, THE SALARY RANGE OF SECTION B, THE POSITION, AND THE AVERAGE SUGGESTED INCREASE PERCENTAGE FOR EXECUTIVES BASED ON SALARY SURVEY | Return Reference | Explanation |
|--|--|--|
| | FORM 990, PART VI, SECTION B, LINE 15 | 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 2012. 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 |

| 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 |

| Return Reference | Explanation |
|--------------------------------|--|
| 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 |

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -**SCHEDULE R**

(Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization VIRGINIA FARM BUREAU FEDERATION DLN: 93493281005134

2013

OMB No 1545-0047

Open to Public

Employer identification number

54-0419002

Related Organizations and Unrelated Partnerships ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990. ► See separate instructions. ► Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Inspection

| Part I Identification of Disregarded Entities Complete | ıf the organization | answered "Yes" or | n Form 990, Pa | irt IV, line 33. | | | | |
|---|---|---|-------------------------|--|----------------|--|---------|--------------------------|
| (a) Name, address, and EIN (if applicable) of disregarded entity | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Total income | (e) End-of-year assets | Direct o | (f) ontrolling itity | | |
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| | | | | | | | | |
| Part II Identification of Related Tax-Exempt Organiza or more related tax-exempt organizations during the | tions Complete ıf t tax year. | he organization ar | nswered "Yes" | on Form 990, P | art IV, line | 34 because it l | had on | е |
| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Exempt Code sect | tion (e) Public charity (if section 501) | status [c)(3)) | (f) Direct controlling entity | | 512(introlle ity? |
| | | | | | | | Yes | No |
| | | | | | | | | |
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| | | | | | | | | |
| For Paperwork Reduction Act Notice, see the Instructions for Form 990. | | Cat No 501 | 35Y | | S | chedule R (Form | 990) 20 | 013 |

| (a) Name, address, and EII related organization | N of | (b) Primary activity | (c) Legal domicile (state or foreign country) | entity | (e) Predominant income(related, unrelated, excluded from tax under sections 512- 514) | (f) Share of total income | | | ortionate | (i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) | · | ral or aging ner? | (k) Percentag ownershi |
|---|--|--|--|---------------------------------|---|---------------------------------|-------------------|--------------------------------------|-----------|---|----------------|--|------------------------------|
| ТОВІО ЦС | | SUPPORT OF TRANGENIC | VA | | UNRELATED | | | Yes | No No | | Yes Yes | No | |
| 80 WEST CREEK PARKWAY HMOND, VA 23238 1973793 | | TOBACCO (INACTIVE) | | | | | | | | | | | |
| | | | | | | | | | | | | | |
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| | | | | | | | | | | | | | |
| It IV Identification of Related line 34 because it had one of | l Organizations Taxa or more related organiz | ble as a Corpo ations treated a | oration as a cor | or Trust poration or | Complete if r trust during | the organi the tax y | zatıon ar ear. | iswere | ed "Ye | s" on Form | า 990 | , Par | t IV, |
| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | 1 | (d) Direct control entity | (e) Type of en (C corp, corp, or trust) | S Incon | total Sha | (g) re of en of-year assets | | (h) Percentage ownership | (b cor e | (i) tion 512 o)(13) ntrolled entity? | l |
| Additional Data Table | | | | | | | | | | | Y | es | No No |
| | | | | | | | | | | | | | |
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| | | | | | | | | | | | | | |

| | Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule | | | | | Yes | No | | | | |
|------------|--|---|------------------------|---|------------|---------|----|--|--|--|--|
| 1 D | uring the tax year, did the orgranization engage in any of the following transactions with one or more rel | ated 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 | | | | |
| е | 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 | h Purchase of assets from related organization(s) | | | | | | | | | | |
| i | Exchange of assets with related organization(s) | | | | 1 i | | 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) | | | | 1k | | No | | | | |
| ı | 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 | Other transfer of cash or property to related organization(s) | | | | 1r | | No | | | | |
| 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 | | | | | | | | | | |
| | (a) Name of related organization | (b) Transaction type (a-s) | (c) Amount involved | (d) Method of determining amo | ount in | ivolved | | | | | |
| ee A | iditional Data Table | | | | | | | | | | |
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Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on 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

| revenue) that was not a related organization. See instructions i | | | | | | | | | | | | | |
|--|-------------------------|---|--|-----|--|------------------------------------|--|--|----|--|---|----------|--------------------------------|
| (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 sections 512- 514) | | (e) all partners section 501(c)(3) anizations? | (f) Share of total Income | (g) Share of end-of-year assets | (h) Disproprtiona allocations ⁷ | _ | (i) Code V ² UBI amount in box 20 of Schedule K-1 (Form 1065) | (j) General or managing partner? | _ | (k) Percentage ownership |
| | | | 314) | Yes | No | | | Yes | No | | Yes | No | |
| | | | | | | | | | | | | 1 | |
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Schedule R (Form 990) 2013

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2013

Software ID: Software Version:

EIN: 54-0419002

Name: VIRGINIA FARM BUREAU FEDERATION

| (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 | Section (13) co | (i) in 512(b) ontrolled itity? |
|---|--------------------------------|---|--|---|---------------------------------|--|--------------------------------|--------------------|---|
| VIRGINIA FARM BUREAU HOLDING CORPORATION 12580 WEST CREEK PARKWAY RICHMOND, VA 23238 54-0929947 | HOLDING COMPANY | VA | | С | 821,921 | 3,378,001 | 100 000 % | Yes | No No |
| VIRGINIA FARM BUREAU SERVICE | INSURANCE BROKER | | VIRGINIA FARM BUREAU HOLDING COPORATION | С | 1,858,528 | 6,507,899 | | | No |
| | INSURANCE BROKER | | VIRGINIA FARM BUREAU HOLDING COPORATION | С | 130,687 | 1,029,402 | | | No |
| | INSURANCE BROKER | | VIRGINIA FARM BUREAU HOLDING COPORATION | С | 4,492,727 | 8,227,134 | | | No |
| | INSURANCE BROKER | | VIRGINIA FARM BUREAU HOLDING COPORATION | С | 421,688 | 499,963 | | | No |
| | MARKETING SERVICE | | VIRGINIA FARM BUREAU HOLDING COPORATION | С | 16,608 | 93,977 | | | No |
| BENEFIT DESIGN GROUP INC | INSURANCE BROKER | | VIRGINIA FARM BUREAU HOLDING COPORATION | С | 246,185 | 5,098,897 | | | No |
| COMMONWEALTH FAIRS & EVENTS INC 12580 WEST CREEK PARKWAY RICHMOND, VA 23238 45-5587952 | FAIRS & EVENTS | | VIRGINIA FARM BUREAU HOLDING COPORATION | С | 59,566 | 15,150,397 | | | No |
| VIRGINIA FARM BUREAU | AGRICULTURAL SERVICE | VA | | С | | 10,331 | 100 000 % | | No |

| (c) on Amount Involved | |
|------------------------|---|
|) | (d) Method of determining amount involved |
| 2,423 | |
| 99,459 | |
| 442 | |
| -108 | |
| | |
| | |
| | |
| 35,008 | |
| -4 | |
| | 99,459 442 -108 |