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Form 990

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.
Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Department of the Treasury Internal Revenue Service

Open to Public Inspection

Α	For the	e 2014 calen	dar year, or tax year beginning , 2014, and ending	3
В	Check if	applicable	C Name of organization S.C. FUTURE FARMERS OF AMER. FNDTN. D Employe	r Identification number
	Add	Iress change	Doing business as 51-0	174928
	Nan	ne change	Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephon	e number
	Initi	al return	PO BOX 52 (803) 894-3261
	Flna	l return/terminated	City or town, state or province, country, and ZIP or foreign postal code	
	HAm	ended return	PELION SC 29123 G Gross rec	cepts \$ 469,623.
	HAPE	olication pending	F Name and address of principal officer H(a) Is this a group return for	or subordinates? Yes X No
	ш	, -	Frank Stover PO Box2 Pelion SC 29123 H(b) Are all subordinates in If 'No,' attach a list (see	ncluded? Yes No
ī	Tax-e	exempt status	X 501(c)(3) 501(c) () 4947(a)(1) or 527 527	e instructions/
j-		site: N/		ber ►
ĸ		of organization		ate of legal domicile SC
	rt I	Summar		
110	1 1	Briefly describ	be the organization's mission or most significant activities: Promote & support students	in agrıculture in SC.
_		,		
Activities & Governance		<u>-</u>		
Ë				
Ş		Check this bo		ets
Ğ			oting members of the governing body (Part VI, line 1a)	3 9
ŝ			dependent voting members of the governing body (Part VI, line 1b)	4 9
ij	5	Total number	of individuals employed in calendar year 2014 (Part V, line 2a) · · · · · · · · · · · · · · · · · · ·	
ਚੁੰ			ed business revenue from Part VIII, column (C), line 12	6 0 7a 0.
⋖			business taxable income from Form 990-T, line 34 · · · · · · · · · · · · · · · · · ·	7b 0.
		14et uni ciatou	Prior Year	Current Year
	8	Contributions		
9	9	Program serv	and grants (Part VIII, line 1h)	
Revenue	10	Investment in	ncome (Part VIII, column (A), lines 3, 4, and 7d)	17. 433,754.
æ	11	Other revenu	e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	
			e – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	17. 433,754.
	13	Grants and si	imilar amounts paid (Part IX, column (A), lines 1-3)	00. 200,000.
	14	Benefits paid	to or for members (Part IX, column (A), line 4)	
	15		er compensation, employee benefits (Part IX, column (A), lines 5-10)	57. 27,307.
Expenses	16 a	Professional	fundraising fees (Part IX, column (A), line 11e)	
e De	, h		sing expenses (Part IX, column (D), line 25) ▶ 0 .	
찣	4-0			00 E0 030
8		Revenue less		
200	20	Total access	(Part X, line 16)	
96	21		es (Part X, line 26)	9,778,931.
Not Assets Fund Beland	21		` '	1.4 0.770.031
$\overline{}$			r fund balances Subtract line 21 from line 20	14. 9,778,931.
	art II		re Block	
com	er penalti plete De	ies of религу, i de claration of prepa	cclare that I have examined this return, including accompanyin <u>g schedu</u> les and statements, and to the best of my knowledge and belie irer (other than officer) is based on all information of which preparer has any knowledge	st, it is true, correct, and
			track Store 5-1	72 -/
e:	an.	Signate	ure of officer Date	7-(3
He	gn ere	4	PRANK R. STOVER EXECUTIVE TURECTU	
,	,,,	Туре	or print name and title.	
		Print/Type	preparer's name Preparer's signature Date Check	if PTIN
	لہ:	'' '	ith Dooley, CPA/PFS R. Keith Dooley, CPA/PFS Self-employed	-
Pa	ua epare		1/	120020033
	epare se On			57-0757755
		-y Firms addr	LEXINGTON SC 29072 Phone no	(803) 359-3800
NA-	u tha II	DS discuss th	as return with the preparer shown above? (see instructions)	X Yes No
			Reduction Act Notice, see the separate instructions. TEEA0101 05/28/14	Form 990 (2014)
HΔ	A POF	-anerwork I	recontinuo eta vonce. See die separate manuchons.	FUH 330 (/V/4)

Form 990` (2014) S.C. FUTURE I	FARMERS OF AMER. FNDTN.	51-0174928	Page 2
Part III Statement of Progran	n Service Accomplishments		
Check if Schedule O contain	s a response or note to any line in this Part III	· · · · · · · · · · · · · · · · · · ·	· · · · · <u>[</u>
1 Briefly describe the organization's m	nission:		
	dents in agriculture in SC.		
	significant program services during the year which were not listed on		
		· · · · · · · · · · Yes	X No
If 'Yes,' describe these new services			
3 Did the organization cease conduction	ing, or make significant changes in how it conducts, any program ser	rvices? Yes	s X No
If 'Yes,' describe these changes on			
4 Describe the organization's program Section 501(c)(3) and 501(c)(4) organd revenue, if any, for each program	n service accomplishments for each of its three largest program servi anizations are required to report the amount of grants and allocations im service reported.	ces, as measured by expense s to others, the total expense	ses. s,
4a (Code:) (Expenses	\$ 200,000. including grants of \$ 200,000	.) (Revenue \$	0.)
	se of promoting and supporting are in South Carolina.		
			
4 b (Code) (Expenses	\$ including grants of \$) (Revenue \$)
	. _		
	. -		
1 (0)			
4 c (Code) (Expenses	\$ including grants of \$) (Revenue \$)
			-
	. _		-
	-		-
	-		
	-		
4 d Other program services. (Describe			,
(Expenses \$ 4 e Total program service expenses	including grants of \$) (Revenue 200,000.	<u>ਰ</u> ੨	
BAA	TEEA0102 05/28/14	For	m 990 (2014)

			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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
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		х
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? If 'Yes,' complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		х
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		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If</i> 'Yes,' complete Schedule D, Part V	10		X
11	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			
	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	х	
	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	11 b		х
	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	11 c		х
	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	11 d	х	
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		X
	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	11 f		Х
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a	х	
	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	12 b		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	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		х
15	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		х
16	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		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		х
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		Х
	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

PartilV& Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II Х 21 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, 22 Х Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If 'Yes,' complete* 23 Χ Х 242 **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 24c d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d Х 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 Х Schedule L. Part I 25b 26 Χ 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 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28a Х b A family member of a current or former officer, director, trustee, or key employee? If 'Yes.' complete 28b Χ Х 28c Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M Х 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 Х Did the organization liquidate, terminate, or dissolve and cease operations? If Yes, complete Schedule N, Part I. 31 Х Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N. Part II . . Χ 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 33 Χ Was the organization related to any tax-exempt or taxable entity? If Yes,' complete Schedule R, Part II, III, or IV, Х 34 35a **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 Χ Х 36 Χ 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

BAA

Form 990 (2014)

Part V Statements Regarding Other IRS Filings and Tax Compliance Yes No 1 a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 0 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 1 c x (gambling) winnings to prize winners? 2 a 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 Х b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2 b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3 a Did the organization have unrelated business gross income of \$1,000 or more during the year? Х 3 a b If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule $O \cdot \cdot \cdot \cdot \cdot$ 3 b 4 a 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)? Х 4 a b If 'Yes,' enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts. (FBAR) 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?....... 5 a Y Х 5 b b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 c 6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization X 6.4 b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were 6 b Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and X 7 a b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7 b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file 7с X d If 'Yes,' indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 e X 7 f f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?... g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 7 g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a 7 h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?........ 8 Х Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? 9 a X b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?.... 9 b Section 501(c)(7) organizations. Enter b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter b Gross income from other sources (Do not net amounts due or paid to other sources 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? . 12 a b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year | 12b Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 13 a Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in 13 b which the organization is licensed to issue qualified health plans Х

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O

14 a

14b

Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Yes Nο 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 q Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Х 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 Х Did the organization make any significant changes to its governing documents 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Х 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more 7 a Х members of the governing body?............. b Are any governance decisions of the organization reserved to (or subject to approval by) members, 7 h Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8 a **b** Each committee with authority to act on behalf of the governing body? X 8 h 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 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. No 10 a Did the organization have local chapters, branches, or affiliates? Х 10 a b if 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10 b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 Х 12 a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12 b to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in 12 c Х 13 14 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? 15 a Х Х 15 b If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16 a Х b 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 Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed > South Carolina Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Other (explain in Schedule O) Another's website Upon request 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, address, and telephone number of the person who possesses the organization's books and records. FRANK STOVER PO BOX 52, PELION. 29123 (803) 894-3261

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

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of 'key employee.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order, individual trustees or directors, institutional trustees; officers; key employees, highest compensated employees, and former such persons.

				(C)						
(A) Name and Title		than	one	box, u an of ector/	inless fficer a truste		n	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	per week (list any nours for related organiza- tions below dotted line)	individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	compensation from the organization and related organizations
(1) FRANK R. STOVER	15.00									
EXECUTIVE DIRECTOR & TREASUREF	₹	Х		Х		Х		24,000.	0.	0.
(2) J. EARL FRICK	0.00					1				
SECRETARY		X		Х				0.	0.	0.
(3) HUGH P. MCCLIMON BOARD CHAIRMAN	0.00	х		Х				0.	0.	0.
(4) TOM DOBBINS	0.00									
BOARD MEMBER		Х						0.	0.	0.
(5) WILLIAM KEELS	0.00									
BOARD MEMBER		Х						0.	0.	0.
(6) ANNA CATHERINE WAYNE	0.00									
PRESIDENT		Х		x ·				0.	0.	0.
_(7)_TOM_HARMON	0.00									
BOARD MEMBER		Х						0.	0.	0.
_(8) PAT_EARLE	0.00									
BOARD MEMBER		Х						0.	0.	0.
_(9) ALLEN_WILLIAMS	0.00									
BOARD MEMBER		Х				ļ	_	0.	0.	0.
(10) STEVE MCGAHA	0.00	١.,								
BOARD MEMBER		Х		<u> </u>		_	_	0.	0.	0.
(11) DREFUS WILLIAMS	0.00	x							_	_
BOARD MEMBER		^		<u> </u>	_			0.	0.	0.
(12)										
(13)	-									
(14)	_								-	

				(C	٠,						
(A) Name and title	Average hours per	box	, unles	Posi heck i ss pei	tion more rson i	than o s both or/trusto	an ee)	(D) Reportable compensation from	(E) Reportable compensation from	amou	(F) limated nt of other
	week (list any hours for related organiza - tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	fro orga and	ensation om the nization related nizations
(15)						٩		:			_
(16)									,		<u> </u>
(17)											
(18)											
(19)											
(20)											
(21)											
(22)											
(23)	- 										
(24)											. <u>.</u>
(25)										<u> </u>	
1 b Sub-total							-	24,000.	. 0	· 	0.
c Total from continuation sheets to Part VII, Secti d Total (add lines 1b and 1c)			٠.	<u>.</u> .			>	24,000.	0		0.
2 Total number of individuals (including but not limite from the organization ►	d to those	listed	abo	ove)	who	rece	eive	d more than \$100,	000 of reportable o	ompensat	ion
3 Did the organization list any former officer, director	, or truste	e, ke	y em	ploy	/ee,	or hi	ghes	st compensated er	nployee		Yes No
on line 1a ² If 'Yes,' complete Schedule J for such if For any individual listed on line 1a, is the sum of re	portable c	ompe	ensa	tion	and	othe	r coi	mpensation from		3	X
the organization and related organizations greater such individual		• • •	• •	٠.	٠.	• •	• •			4	- X
5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? If Yes, 'o										5	X
Section B. Independent Contractors 1 Complete this table for your five highest compensation from the organization. Report compensation from the organization.	ted indepe	ender or the	nt co cale	ntra	ctors	that	rec	eived more than \$	100,000 of	ear.	· · · · · · · · · · · · · · · · · · ·
(A) Name and business addr								(B Description of)	. (C) ensation
								-			
Total number of independent contractors (including \$100,000 of compensation from the organization.)	but not lii	nıted	to ti	hose	list	ed at	ove	e) who received mo	ore than		

Form	990	(2014) S.C. FUTURE FARMERS OF AMER. F	NDTN.		51-01/4928	Page 9
Part	VII	Statement of Revenue				
		Check if Schedule O contains a response or note to any line	e in this Part VIII			
	_	SHOOK II GOILGUIG G COILGIIIS & 103401136 OF HOLE to ally IIII	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
S 5	1 a	Federated campaigns 1a				
		Membership dues 1 b				
5 2		Fundraising events 1c				
Z Z		Related organizations 1 d				
5 8		Government grants (contributions) . 1 e				
동등		- · · · · · · · · · · · · · · · · · · ·				
Contributions, Giffs, Grants and Other Similar Amounts	f	All other contributions, gifts, grants, and similar amounts not included above . 1 f				
100	g	Noncash contributions included in lines 1a-1f \$				
a So So	h	Total. Add lines 1a-1f				
ue		Business Code				
Yes	2 a					
Re	b					
<u>.</u>	С					
Ş.	d					
Program Service Revenue	e					
gra	f	All other program service revenue	-			
န		Total. Add lines 2a-2f				
		Investment income (including dividends, interest and				
	3	other similar amounts)	419,637.	0.	0.	419,637.
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties				
		(ı) Real (ıı) Personal				
	6a	Gross rents				
		Less: rental expenses				
		Rental income or (loss)				
		Net rental income or (loss)				
		(i) Securities (ii) Other				
	7 a	Gross amount from sales of assets other than inventory 49,986.				
	b	Less cost or other basis and sales expenses 35,869.				
	ہ ا	Gain or (loss) 14, 117.				
	Į.	Net gain or (loss)	1 / 117	_	0	14 117
	1		14,117.	0.	0.	14,117.
3	8 a	Gross income from fundraising events (not including \$				
Other Revenue		of contributions reported on line 1c).				
æ		See Part IV, line 18 a				
7	_h	Less: direct expenses b				
Ě		Net income or (loss) from fundraising events				
O						
		Gross income from gaming activities See Part IV, line 19 a				
	b	Less: direct expenses b				
	c	Net income or (loss) from gaming activities ▶				
	10 a	Gross sales of inventory, less returns and allowances				
	١,	Less cost of goods sold b				
		Net income or (loss) from sales of inventory				İ
	⊢ٿ	Miscellaneous Revenue Business Code				
	11 a					1
	b					
	֡֡֞֞֞֞֞֞֞֡֡֡֞֞֞֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡					
	ہ	All other revenue				
		Total. Add lines 11a-11d				
	, ₹	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		i .		1

12 Total revenue. See instructions

0.

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 . . (D) Fundraising (A) Total expenses (B) Do not include amounts reported on lines Program service Management and 6b. 7b. 8b. 9b. and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV. line 21 200,000 200,000 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16. Benefits paid to or for members. Compensation of current officers, directors, trustees, and key employees O 24,000 24,000 Compensation not included above, to Other salanes and wages. 1,362 0 362 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions). Other employee benefits 1,945. 0 1,945 0. Fees for services (non-employees) 5,000. 0 5,000 5,500 0 5,500 e Professional fundraising services See Part IV, line 17 . Other (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) . . . Office expenses 3,272 3,272 0. Information technology Royalties Occupancy Travel 1.799 0 1.799 0 17 Payments of travel or entertainment expenses for any federal, state, or local Conferences, conventions, and meetings . . . Depreciation, depletion, and amortization . . . 1,651 0 1,651 0 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 a Stipends_____ 1,400 0 1.400 b <u>Investment Expense</u> _____ 40.188 0 40,188 Ω c Bank Charges 29 0 29 0. 286,146. 200,000. 25 Total functional expenses Add lines 1 through 24e. . 86,146. 0. 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

		Check if Schedule O contains a response or note to any line in this Part X	(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing		1	
	2	Savings and temporary cash investments	63,875.	2	164,913.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	-	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
Ø	7	Notes and loans receivable, net		7	
<u>8</u>	8	Inventories for sale or use		8	
Assets	9	Prepaid expenses and deferred charges	173.	9	173.
	10 a	Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D	<u> </u>		
	b	Less: accumulated depreciation 10b 3,770.	590,846.	10 c	590,846.
	11	Investments — publicly traded securities	8,773,940.	11	8,937,270.
	12	Investments — other securities See Part IV, line 11	0,773,310.	12	0,001,210.
	13	Investments – program-related. See Part IV, line 11		13	
1	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	2,380.	15	85,729.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	9,431,214.	16	9,778,931.
-	17	Accounts payable and accrued expenses	J, 431, 214.	17	<u> </u>
l	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
Ø	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	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		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	<u></u>
	24	Unsecured notes and loans payable to unrelated third parties	· · · · · · · · · · · · · · · · · · ·	24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0.	26	0.
8		Organizations that follow SFAS 117 (ASC 958), check here ► and complete lines 27 through 29, and lines 33 and 34.			
Ĕ	27	Unrestricted net assets		27	
ğ	28	Temporarily restricted net assets		28	
9	29	Permanently restricted net assets		29	
Net Assets or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ► X and complete lines 30 through 34.			
Ø	30	Capital stock or trust principal, or current funds		30	
8	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Asi	32	Retained earnings, endowment, accumulated income, or other funds	9,431,214.	32	9,778,931.
e	33	Total net assets or fund balances	9,431,214.	33	9,778,931.
- *		Total liabilities and net assets/fund balances	9,431,214.	34	9,778,931.

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Form 990 (2014)

Form	990 (2014) S.C. FUTURE FARMERS OF AMER. FNDTN. 51-	0174928		Pag	ge 12
Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI			· · · <u> </u>	. [
1	Total revenue (must equal Part VIII, column (A), line 12)	1	4:	33,7	54.
2	Total expenses (must equal Part IX, column (A), line 25)	2	28	36,1	46.
3	Revenue less expenses. Subtract line 2 from line 1	3	14	47,6	08.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	_9,43	31,2	14.
5	Net unrealized gains (losses) on investments	5	20	00,1	09.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Pnor period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	9,7	<u> 18,9</u>	<u>31.</u>
Par	TXII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. [
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.				
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a	X	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a				
	separate basis, consolidated basis, or both: Separate basis				
				.,	
t	Were the organization's financial statements audited by an independent accountant?		2 b	X	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both				
	X Separate basis				
c	: If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audireview, or compilation of its financial statements and selection of an independent accountant?	t, •••••	2 c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.				
3 a	a 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?		3 a		Х
t	of Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?]	
BAA	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3 b	990 (2	
$-4 \Lambda \Lambda$			-orm	aan /	<i>71</i> 17 71 11

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization		· · · · · · · · · · · · · · · · · · ·			Employer identificat	lon number			
S.C. FUTURE FARMERS OF A	AMER. FNDTN.				51-0174928	3			
Part I Reason for Public Cha		rganizations must co	omplete	this p	art.) See instruction	S.			
The organization is not a private foundate	tion because it is (For	lines 1 through 11, checl	k only on	e box)					
1 A church, convention of churc	hes, or association of	churches described in se	ction 17	0(b)(1)(<i>i</i>	A)(i).				
2 A school described in section	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)								
3 A hospital or a cooperative ho	spital service organiza	ation described in section	170(b)(1)(A)(iii)					
4 A medical research organizati	on operated in conjun	ction with a hospital desc	ribed in s	ection	170(b)(1)(A)(iii) Enter th	e hospital's			
name, city, and state		_	- -	- -					
5 An organization operated for the 170(b)(1)(A)(iv). (Complete F	Part II.)					ın section			
	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described								
├ in section 170(b)(1)(A)(vi). (Complete Part II.)		governn	nental ur	nit or from the general pu	blic described			
8 A community trust described i									
from activities related to its ex investment income and unrela	An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)								
10 An organization organized and	d operated exclusively	to test for public safety.	See sect	ion 509	(a)(4).				
11 X An organization organized and or more publicly supported organizes 11a through 11d that details	nanizations described	in section 509(a)(1) or s	ection 5	09(a)(2).	See section 509(a)(3).	irposes of one Check the box in			
a Type I. A supporting organiza	Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must								
b X Type II. A supporting organizar management of the supporting must complete Part IV, Sect	ation supervised or co g organization vested	ntrolled in connection with in the same persons that	ts supp control o	orted or r manag	ganızatıon(s), by havıng je the supported organiza	control or ation(s) You			
c Type III functionally integration (s) (see instruction	ns). You must comp	lete Part IV, Sections A,	D, and E	.					
d Type III non-functionally integrated. The or instructions). You must com	ganization generally r	nust satisfy a distribution	connecti requirem	on with ent and	its supported organization an attentiveness requires	n(s) that is not ment (see			
e Check this box if the organiza integrated, or Type III non-fun	ictionally integrated su	ipporting organization.		з а Туре	I, Type II, Type III function				
f Enter the number of supported or	•				• • • • • • • • • • • • •	1			
g Provide the following information		organization(s)	_						
(I) Name of supported organization	(II) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is organizati in your go docum	on listed overning	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)			
			Yes	No					
(A) SC ASSOCIATION OF FUTURE FARMERS OF AMERICA	57-6029435	501(c)(3)	X		200,000.				
(B)									
(C)									
(D)									
(E)						-			
			 						
Total					200,000.				

Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support							
	ndar year (or fiscal year nning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total	
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')							
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	_						
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3							
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							
6	Public support. Subtract line 5 from line 4							
Sec	tion B. Total Support					1	·-	
	ndar year (or fiscal year nning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total	
7	Amounts from line 4							
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)							
11	Total support. Add lines 7 through 10							
12	Gross receipts from related activit	ies, etc (see instru	ctions)			<u>12</u>		
13	First five years. If the Form 990 i organization, check this box and s	top here		thırd, fourth, or fift	h tax year as a sec	tion 501(c)(3)	▶ 🔲	
Sec	tion C. Computation of Pu	blic Support F	Percentage					
	Public support percentage for 201							
	Public support percentage from 26							
16 a	33-1/3% support test — 2014. If and stop here. The organization	the organization d qualifies as a publi	id not check the bo cly supported orga	ox on line 13, and inization	the line 14 is 33-1/3	3% or more, chec	k this box	
t	33-1/3% support test — 2013. If and stop here. The organization	the organization di qualifies as a publi	d not check a box of cly supported orga	on line 13 or 16a, anization	and line 15 is 33-1.	/3% or more, ched	ck this box	
17 a	17 a 10%-facts-and-circumstances test — 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization							
	o 10%-facts-and-circumstances to or more, and if the organization m organization meets the 'facts-and	eets the 'facts-and -circumstances' tes	I-circumstances' te st The organization	st, check this box n qualifies as a pu	and stop here. Ex blicly supported or	plaın ın Part VI ho ganızatıon	w the	
18	Private foundation. If the organiz	zation did not chec	k a box on line 13,	16a, 16b, 17a, or				
					C-	hadula A /Cama O	00 or 000 EZ) 2014	

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you	checked the box on line 9 of I	Part I or if the organization	n failed to qualify under F	Part II If the organization fail:
to qualify under the te	ests listed below, please comp	lete Part II.)		

	ion A. Public Support				•		
Calend	lar year (or fiscal yr beginning in) 🟲	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Gifts, grants, contributions and membership fees received. (Do not include					:	
	any 'unusùal grants ') Gross receipts from admis-						
	sions, merchandise sold or						
	services performed, or facilities furnished in any activity that is						
	related to the organization's		:				
	tax-exempt purpose	-					
	that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to or expended on						
	its behalf						
5	facilities furnished by a						
	governmental unit to the organization without charge.			!			
c	Total. Add lines 1 through 5						
	Amounts included on lines 1,						
	2, and 3 received from disqualified persons						
b	Amounts included on lines 2						
	and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or						
	1% of the amount on line 13 for the year	:					
С	Add lines 7a and 7b	-					
8	Public support (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
Calen	dar year (or fiscal yr beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 6						
10 a	Gross income from interest, dividends,				-		
	payments received on securities loans, rents, royalties and income from					İ	
	similar sources						
b	Unrelated business taxable income (less section 511						
	taxes) from businesses						
	acquired after June 30, 1975 Add lines 10a and 10b	· 	<u> </u>				
11	Net income from unrelated business						
•	activities not included in line 10b,					ļ	
	whether or not the business is regularly carried on						
12	Other income. Do not include						
	gain or loss from the sale of capital assets (Explain in						
	Part VI.)						
	Total support. (Add lines 9, 10c, 11 and 12.)						
	First five years. If the Form 990 is organization, check this box and s	top here		third, fourth, or fiftl	h tax year as a sec	tion 501(c)(3)	▶ □
<u>Sec</u>	tion C. Computation of Pu						 _
15	Public support percentage for 201	•				 	15 %
16	Public support percentage from 20						16 %
	tion D. Computation of Inv						47 0
17	Investment income percentage for						17 %
18	Investment income percentage fro						18 %
	33-1/3% support tests $-$ 2014. If is not more than 33-1/3%, check t	his box and stop h	ere. The organiza	tion qualifies as a	publicly supported	organization .	
t	33-1/3% support tests — 2013. If line 18 is not more than 33-1/3%,	the organization d	lid not check a box	on line 14 or line	19a, and line 16 is	more than 33-	1/3%, and
20	Private foundation. If the organiz						
20	i invate roundation. If the organiz	adon did not check	. u por on illo 14,	.54, 51 155, 61166			

Part IV Supporting Organizations

Section A. All Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents?			
٠	If 'No,' describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe			
	the designation. If historic and continuing relationship, explain	1	X	
2	Did the organization have any supported organization that does not have an IRS determination of status under section			
	509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)	2	-	$\tilde{\mathbf{X}}$
	described in Section 309(a)(1) or (2)			
2	a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b)			
3	and (c) below	3a		Х
	(4) 20(4)			
	b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in Part VI when and how the organization	-	-	
	made the determination	3b		
	c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use			'
	purposes' if tes, explain in Fart vi what controls the organization put in place to ensure such use	3c		
	We have the second of the Market Office of the second of t			
4	a Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		X
	" you checked Tra of The first arts, answer (b) and (c) below	 ~		
	t. Dut the construction have ultimate control and disperture in deciding tubother to make growth to the foreign aumented			
	b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in Part VI how the organization had such control and discretion despite being controlled			l _
	or supervised by or in connection with its supported organizations	4b		
	c Did the organization support any foreign supported organization that does not have an IRS determination under			
	sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in Part VI what controls the organization used to ensure that			
	all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c		L
5	a Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported			
	organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the			ı
	organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by			<u> </u>
	amendment to the organizing document)	5a		Х
	b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the	:		
	organization's organizing document?	5b		
	c Substitutions only. Was the substitution the result of an event beyond the organization's control?			l
	c substitutions only. Was the substitution the result of an event beyond the organization's control (5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
-	anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one			
	or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of			·
	the filing organization's supported organizations? If 'Yes,' provide detail in Part VI	6		Х
_				
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with			
	regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990)	7		X
		<u> </u>		
8		-		
	complete Part I of Schedule L (Form 990)	8		X
_	184 - the constant of the state			
9	a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))?	L		
	If 'Yes,' provide detail in Part VI	9a	_	X
			\vdash	
	b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the	- ^r		²
	supporting organization had an interest? If 'Yes,' provide detail in Part VI	9ь		
	c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from,			
	assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI	9с		1
		<u> </u>		
10	a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding			
	certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer (b) below	10a		X
	answei (u) neiow · · · · · · · · · · · · · · · · · · ·	iva		
	b Did the organization, have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine			
	whether the organization had excess business holdings)	10b		ı

Sche	edule A (Form 990 or 990-EZ) 2014 S.C. FUTURE FARMERS OF AMER. FNDTN. 51-017492	:8	F	Page 5
Pai	rt IV Supporting Organizations (continued)		_	
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
á	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	 11a		- - x
ı	A family member of a person described in (a) above?	11b		Х
	A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI	11c		Х
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities if the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any,			
	applied to such powers during the tax year	1		X
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		<u>-</u>
Sec	tion C. Type II Supporting Organizations	<u> </u>	<u>'</u>	
	to the model of th		Yes	No
_			103	110
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the			
	supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		X
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	X	

Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). . . .

all times during the tax year? If 'Yes,' describe in **Part VI** the role the organization's supported organizations played in this regard

3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at

<u>sec</u>	tion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)	:		
	The organization satisfied the Activities Test. Complete line 2 below			
ı	The organization is the parent of each of its supported organizations. Complete line 3 below.			
•	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruct	lions)		
2	Activities Test. Answer (a) and (b) below.		Yes	No
•	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
1	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b	_	
3	Parent of Supported Organizations. Answer (a) and (b) below.			
í	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI	3a		
ı	b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard	3b		
3AA	TEEA0405 07/18/14 Schedule A (Form 990	or 99	0-EZ)	2014

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	• •	•	•		
Sche	edulè A (Form 990 or 990-EZ) 2014 S.C. FUTURE FARMERS OF AMER. FN			.74928	Page
Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizat	tions		
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nother Type III non-functionally integrated supporting organizations must complete Sec	loveml	ber 20, 1970. See instru Athrough E	ıctions. All	
Sec	tion A — Adjusted Net Income		(A) Prior Year	(B) Curre (option	
1	Net short-term capital gain	1			
2	Recoveries of prior-year distributions	2			
3	Other gross income (see instructions)	3			-
4	Add lines 1 through 3	4			
5	Depreciation and depletion	5			
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6			
7	Other expenses (see instructions)	7		†	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		1	
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Curre (option	
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):				
	Average monthly value of secunties	1 a			
t	Average monthly cash balances	1 b			
	Fair market value of other non-exempt-use assets	1 c			
	I Total (add lines 1a, 1b, and 1c)	1 d			
•	Discount claimed for blockage or other factors (explain in detail in Part VI)				
2	Acquisition indebtedness applicable to non-exempt-use assets	2			
3	Subtract line 2 from line 1d	3			
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4			
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6	Multiply line 5 by 035	6			
7	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
Sec	tion C – Distributable Amount			Current	Year

Sec	ction C — Distributable Amount		Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	1
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	

7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).

BAA

Schedule A (Form 990 or 990-EZ) 2014

Part	V Type III Non-Functionally Integrated 509(a)(3) Su	pporting Organiza	ations (continued)	· · · · · · · · · · · · · · · · · · ·
Sect	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt purpose	es	<u> </u>	
2	Amounts paid to perform activity that directly furthers exempt purposes on excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of suppor	ted organizations		
4	Amounts paid to acquire exempt-use assets	. <u> </u>		
5	Qualified set-aside amounts (prior IRS approval required)	· · · · · · · · · · · · · · · · · · ·		
6	Other distributions (describe in Part VI). See instructions			
7	Total annual distributions. Add lines 1 through 6	· · · · · · · · · · · · · · · · · · ·		
8	Distributions to attentive supported organizations to which the organization Part VI). See instructions.			
9	Distributable amount for 2014 from Section C, line 6	· · · · · · · · · · · · · · · · · · ·		
10	Line 8 amount divided by Line 9 amount			
 Sect	ion E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			· · · · · · · · · · · · · · · · · · ·
2	Underdistributions, if any, for years prior to 2014 (reasonable cause required — see instructions)			
3	Excess distributions carryover, if any, to 2014			
а				
b				
С				
d				
е	From 2013			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
i	Carryover from 2009 not applied (see instructions)			·
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2014 from Section D, line 7 \$			
а	Applied to underdistributions of prior years			
	Applied to 2014 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4			<u></u>
5	Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6	Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7	Excess distributions carryover to 2015. Add lines 3j and 4c			
8	Breakdown of line 7			
а				
b				
C				
	Excess from 2013			
	Excess from 2014			

Partiviz Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Pt IV Sec B Ln 1 The supported organization and the supporting organization do not have the autority to appoint the board members of the other organization.

The supported organization provides the supporting organanization a copy of its budget annually.

Pt IV Sec D Ln 2 See above.

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

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

OMB No 1545-0047 2014

Department of the Treasury Internal Revenue Service Name of the organization

m990. Open to Public Inspection
Employer identification number

	S.C. FUTURE FARMERS OF AMER.	FNDTN.			51-0174928	
Par	Organizations Maintaining Donor	Advised Funds or Ot	her Similar Funds	s or Acc		
rai	Complete if the organization answere	ed 'Yes' to Form 990, F	Part IV, line 6.			
		(a) Donor advised	funds	(b) F	unds and other accou	ints
1	Total number at end of year					
2	Aggregate value of contributions to (during year)			_		
3	Aggregate value of grants from (during year)			-		
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor ad are the organization's property, subject to the organization's property, subject to the organization's property, subject to the organization's property, subject to the organization's property, subject to the organization's property, subject to the organization and the organization and the organization are the organization and the organization and the organization are the organization and the organization and the organization are the organization and the organization are the organization are the organization and the organization are the organization and the organization are the organization and the organization are the organization and the organization are the organization are the organization and the organization are the org					No
6	Did the organization inform all grantees, donors, an for charitable purposes and not for the benefit of the impermissible private benefit?	e donor or donor advisor, or	for any other purpose	conferring	i	□No
Par	t II Conservation Easements.		_ -		— Н	
<u>. u.</u>	Complete if the organization answer	ed 'Yes' to Form 990, F	Part IV, line 7.			
1	Purpose(s) of conservation easements held by the	organization (check all that a	apply).			
	Preservation of land for public use (e.g., recrea	ition or education)	Preservation of a l	historically	y important land area	
	Protection of natural habitat		Preservation of a	certified h	storic structure	
	Preservation of open space					
2	Complete lines 2a through 2d if the organization he	eld a qualified conservation o	ontribution in the form	of a conse	ervation easement on	the
	last day of the tax year		1			
					Held at the End of th	e lax Year
	Total number of conservation easements			2 a		
	Total acreage restricted by conservation easement			2 b		
	Number of conservation easements on a certified h		` '	2 c		
(Number of conservation easements included in (c) structure listed in the National Register	acquired after 8/17/06, and	not on a historic	2 d		
3	Number of conservation easements modified, trans tax year ►				ation during the	
4	Number of states where property subject to conserv	vation easement is located	-			
5	Does the organization have a written policy regardi and enforcement of the conservation easements it	ng the periodic monitoring, ii	nspection, handling of	violations,	, 	No
6	Staff and volunteer hours devoted to monitoring, in:					
7	Amount of expenses incurred in monitoring, inspec ►\$	ting, and enforcing conserva	ition easements during	the year		
8	Does each conservation easement reported on line and section 170(h)(4)(B)(ii)?			0(h)(4)(B)((ı) Yes	No
9	In Part XIII, describe how the organization reports of include, if applicable, the text of the footnote to the conservation easements.	conservation easements in it organization's financial state	s revenue and expensements that describes t	e stateme the organi	ent, and balance sheet exation's accounting fo	, and r
Par		tions of Art, Historica	I Treasures, or O	ther Sir	milar Assets.	
1 2	If the organization elected, as permitted under SFA art, historical treasures, or other similar assets held in Part XIII, the text of the footnote to its financial st	S 116 (ASC 958), not to rep	ort in its revenue state tion, or research in furt	ment and herance o	balance sheet works of public service, provi	of de,
ı	If the organization elected, as permitted under SFA historical treasures, or other similar assets held for following amounts relating to these items	AS 116 (ASC 958), to report public exhibition, education,	in its revenue statemer or research in furthera	nt and bala ance of pu	ance sheet works of a ablic service, provide to	rt, he
	(i) Revenue 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, his amounts required to be reported under SFAS 116 ((ASC 958) relating to these i	tems:		_	
	Revenue included in Form 990, Part VIII, line 1					
1	Assets included in Form 990, Part X				► \$	

Scheduliko D (From 990) 2014 S.C. FUZURE FARRIERS OF AMEE. FNDTM. S 1-0.174.92.8 Page Part IF Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)	,	•			•		
Part III	Schedule D (Form 990) 2014 S.C.	FUTURE FARMER	RS OF AMER	FNDTN.	51-	-0174928	Page
3 Using the organization's accusation, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply): a Public exhibition b Scholarly research c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization scollections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization scollections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization scollection and the state of the organization and the organization and the organization and the organization and programs. 1 Administrative expenses. 1 Administrative expenses. 1 Administrative expenses. 2 Provide the estimated percentage of the current year and balance (line 1g, column (a)) held as a Board designated or quasi-endowment. 3 And there are andowment the organizations. 4 Description of property 4 Description of p							
b Scholarly research c	Using the organization's acquisition items (check all that apply):	n, accession, and other	r records, check	any of the following that	are a significant us	e of its collection	
c Preservation for future generations 1 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization's collections and explain how they further the organization's exempt purpose in 1 Part XIII. 5 During they year, did the organization solicitor or receive denations of ant, instorical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1 a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X, line 91. 1 a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1 a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1 a Is the organization and amount on Form 990, Part X, line 21. 2 a Duth the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?	a Public exhibition		d Loan	or exchange programs			
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to arise funds rather than to be maintained as part of the organization's collection?	b Scholarly research		e Other				
Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No Part IV Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' to Form 990, Part IV. line 9, or reported an amount on Form 990, Part XI. line 21. 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part XIII and complete the following lable: 6 Beginning balance 1 1c	c Preservation for future general	tions	Ш				
to be sold to rasse funds rather than to be maintained as part of the organization's collection?. Yes No Part V Inne 9, or reported an amount on Form 990, Part X, line 21. 1 a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1 a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?. 5 Beginning balance 1 c	4 Provide a description of the organia Part XIII.	zation's collections and	d explain how the	y further the organization	n's exempt purpose	; in	
Ine 9, or reported an amount on Form 990, Part X, line 21. 1a is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? b If Yes,' explain the arrangement in Part XIII and complete the following table: c Beginning belance d Additions during the year f Ending belance 1 te 1 th 1 te 1 th 1 te 1 th 1 th 1 th 1 th 1 th 1 th 1 th 1 th	5 During the year, did the organization to be sold to raise funds rather than	on solicit or receive dor n to be maintained as i	nations of art, his part of the organi	torical treasures, or othe zation's collection?	r sımilar assets	Yes	No
on Form 990, Part X?.					wered 'Yes' to F	orm 990, Part	IV,
b If Yes,' explain the arrangement in Part XIII and complete the following table: Complete Com							
c Beginning balance	·					· · · L res	Пио
c Beginning balance	bili Tes, explain the attangement in	rait Aili and complete	e the following ta	bie		Amount	
d Additions during the year e Distributions during the year f Ending balance. 2 a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account hiability? 2 a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account hiability? Yes No bif 'Yes,' explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. Part V Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10. 1 a Beginning of year balance b Contributions C Net investment earnings, gains, and losses G Gration or scholarships G Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment The percentages in lines 2a, 2b, and 2c should equal 100%. 3 a Are there endowment funds not in the possession of the organization that are held and administered for the organizations in lines 2a, 2b, and 2c should equal 100%. 3 a Are there endowment funds not in the possession of the organization that are held and administered for the organizations in the possession of the organization that are held and administered for the organizations in the possession of the organization that are held and administered for the organizations in the possession of the organization that are held and administered for the organizations in the possession of the organization sendowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) basis (other) basis (other)	• Pogunning halanga				10	Amount	.
e Distributions during the year fending balance. 1 e Inding balance. 2 a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?							
f Ending balance							
2 a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?							
b If 'Yes,' explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. Part V Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10. 1 a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back	-				<u> </u>		
Part V Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10. 1 a Beginning of year balance	_				-		HNO
1 a Beginning of year balance	b if Yes, explain the arrangement in	Part AIII. Check here	ii ine explanatior	i nas been provided in Pa	art XIII		· Ш
1 a Beginning of year balance	Part V Endowment Eunda C	omplote if the ora	anization and	word 'Voc' to Form	OOO Bort IV II	20 10	
1 a Beginning of year balance	Part V Endowment Funds. C						
b Contributions	4 - Designing of year balance	(a) Current year	(b) Prior year	(c) Two years back	(a) Three years	Dack (e) Four y	ears back
c Net investment earnings, gains, and losses	• • •						
and losses	b Contributions						
e Other expenditures for facilities and programs							
and programs	•						
g End of year balance							
2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment \$\bigselow \bigselow	f Administrative expenses						
a Board designated or quasi-endowment \$ b Permanent endowment \$ c Temporarily restricted endowment \$ The percentages in lines 2a, 2b, and 2c should equal 100%. 3 a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations	g End of year balance						
b Permanent endowment		•		ı, column (a)) held as			
c Temporarily restricted endowment ▶	a Board designated or quasi-endowr	nent ►	용				
The percentages in lines 2a, 2b, and 2c should equal 100%. 3 a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations	b Permanent endowment -	olo					
3 a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations	c Temporarily restricted endowment	•	8				
organization by: (i) unrelated organizations	The percentages in lines 2a, 2b, as	nd 2c should equal 100	0%.				
(ii) unrelated organizations		the possession of the	organization that	are held and administer	ed for the	Ye	s No
(ii) related organizations				<i></i>		3a(i)	
b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R?							
4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (other) (c) Accumulated depreciation							_
Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation	-						
Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value					 _		
(investment) basis (other) depreciation			es' to Form 9	90, Part IV, line 11a	a. See Form 99	0, Part X, line	10.
	Description of property					d (d) Book	value
	1 a Land			, ,		59	90,846.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land	590,846.			590,846.
b Buildings	0.			0.
c Leasehold improvements				-
d Equipment		3,770.	3,770.	0.
e Other				

. ► 590,846. Schedule **D** (Form 990) 2014

Schedule D (Form 990) 2014 S.C. FUTURE FARME	RS OF AMER. FNI	DTN	51-0174928	Page 3
Part VII Investments — Other Securities. Complete if the organization answered	'Yes' to Form 990, i	Part IV, line 11b. See	Form 990, Part X, line	e 12.
(a) Description of security or category (including name of security)	(b) Book value		ation Cost or end-of-year market	
(1) Financial derivatives	•			
(2) Closely-held equity interests	-			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
(1)				
Total. (Column (b) must equal Form 990, Part X, column (B) line 12)	•			
Part VIII Investments — Program Related.	N/! t- F 000 !	Dank IV Bris 44 - Oa -	F 000 D1 V I'-	- 40
Complete if the organization answered (a) Description of investment type	(b) Book value			
	(b) Book value	(c) Method of Valuation	on Cost or end-of-year mar	ket value
(1)				
(2)	-			
(3)				
(4)				
(5)				
(6)				
(7)	-	 		
(8)				
(9)	-			
(10)				
Total. (Column (b) must equal Form 990, Part X, column (B) line 13) Part IX Other Assets.				
Complete if the organization answered	'Yes' to Form 990, I	Part IV, line 11d. See	Form 990, Part X, lin	e 15.
(a) D	escription		(b) Bo	ok value
(1) ACCRUED INTEREST & DIVIDE				85 , 730.
(2) PURCHASED INTEREST FHLMC				0.
(3) ROUNDING	= =			-1.
(4)				· · - · · · ·
(5)				
(6)				
(7) (8)				
(9)				
(10)				
Total. (Column (b) must equal Form 990, Part X, column (B)	line 15.)			85,729.
Part X Other Liabilities.	,			00/120.
Complete if the organization answered 'Yes' to	Form 990, Part IV, line 1	11e or 11f. See Form 990,	Part X, line 25	
(a) Description of liability	(b) Book value			
(1) Federal income taxes				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9) (10)				
(11)				
Total (Column (b) must equal Form 990, Part X, column (B) line 25) - 2. Liability for uncertain tax positions In Part XIII, provide the text of the fo		annial statements that reports the	ne organization's liability for upon	tain.
tax positions under FIN 48 (ASC 740) Check here if the text of the footnot				
BAA	TEEA3303 08/25/14		Schedule D (For	m 990) 2014
				

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Provide the descriptions required for Part II. lines 3.5. and 9. Part III. lines 1.

Amounts included on Form 990, Part IX, line 25, but not on line 1: a investment expenses not included on Form 990, Part VIII, line 7b...

5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b Also complete this part to provide any additional information.

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Schedule D (Form 990) 2014

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286,146.

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SCHEDULE 1 (Form 990)		Gov Gov	ants and Oth ernments, an	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States	o Organizations the United Starms 990, Part IV, line 21	s, ites or 22.		OMB No 1545-0047
Department of the Treasury Internal Revenue Service		The Information ■	about Schedule I (► Attach to Form 990. ► Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.). uctions is at www.irs.g	ov/form990.		Open to Public Inspection
Name of the organization							Employer identification number	ation number
S.C. FUTURE FAR Part General In	FARMERS OF AMER Information on Grand	CUTURE FARMERS OF AMER. FNDTN. General Information on Grants and Assistance	ance				51-01/4928	20
1 Does the organizat the selection criterical Describe in Part IV	tion maintain records is used to award the the organization's pi	to substantiate the arr grants or assistance? rocedures for monitorir	nount of the grants or	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	s' eligibility for the grant	s or assistance, and		X Yes No
Part II Grants and Form 990, I	d Other Assista Part IV, line 21 fc	nce to Domestic or any recipient tha	Organizations at received more	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answere Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	can be du	Complete if the organization answered 'Yes' to plicated if additional space is needed.	on answered 'Ye.	s' to
(a) Name and address of organization or government	ass of organization mment	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) SC_ASSOCIATION	OE_EUTURE_ 9224	57-6029435						Operating Expe
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
2 Enter total number	of section 501(c)(3)	Enter total number of section 501(c)(3) and government organizations		sted in the line 1 table				
1 ~	eduction Act Notice	Enter total number of other organizations issed in the line I table For Paperwork Reduction Act Notice, see the Instructions fo	for Form 990.		TEEA3901 06/19/14	06/19/14	Schedu	Schedule I (Form 990) (2014)

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Schedule I (Form 990) (2014)

[Partition Grants and Other Assistance to Domestic Individuals. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(f) Description of non-cash assistance						Jitional information.
(e) Method of valuation (book, FMV, appraisal, other)						n (b), and any other add
(d) Amount of non-cash assistance						ine 2, Part III, colum
(c) Amount of cash grant						required in Part I, I
(b) Number of recipients						ide the information
(a) Type of grant or assistance	2	4	LC.	, c	7	Partiv Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization		Employer Identification number
S.C. FUTURE FARME	RS OF AMER. FNDTN.	51-0174928
Pt VI, Line 6	The foundation has no members outside of the boa	
	5 members of the board are elected by the board.	4 members are from the
Pt VI, Line 7a	Line 7a agriculture teacher association.	
Pt VI, Line 11b	The 990 is reviewed by the treasurer prior to fi	iling.