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BAA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990**

OMB No. 1545-0047 2015

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.

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

Open to Publications I

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Ma	v the IRS	discuss th	is return with the preparer	shown above? (see instructions)	()				Yes No

Form 990 (2015)

TEEA0113L 10/12/15

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S: e: - - - - - - - - - - - - - - - - - -	Code:) (Expense county vol	ses \$ Lunteers to repagriculture. scribe in Schedule O.)	See Sc	county farm but	reau at meetings	and	
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			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		X
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		X
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		
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? If 'Yes,' complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		W.	
	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		X
	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	111		_X
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		X
-	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
	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? <i>If 'Yes,' complete Schedule F, Parts I and IV</i>	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

Note. All Form 990 filers are required to complete Schedule O

BAA

X

Form 990 (2015)

Parely Checklist of Required Schedules (continued) Yes No X 20a Did the organization operate one or more hospital facilities? If 'Yes', complete Schedule H 20a **b** If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 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, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III Х 22 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 Х Schedule J. 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...... X 24a **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?... 24h 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 25 a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit 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 25b 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 'Yes', complete Schedule L, Part II..... Х 26 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 Х of any of these persons? If 'Yes,' complete Schedule L, Part III 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): Х a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L. Part IV. 282 **b** A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV. Х 28h Х 280 X Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation Х contributions? If 'Yes,' complete Schedule M. . 30 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I..... 31 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Х 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I 33 Х 33 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, X 34 35 a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X **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 36 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 37 Х Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

X

14 a

14 b

Form **990** (2015)

Form 990 (2015) SPARTANBURG COUNTY FARM BUREAU 57-0345437 Park Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V. Yes Nο 1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 6 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1 b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 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 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? b If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O 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 Х financial account in a foreign country (such as a bank account, securities account, or other financial account)?. **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) X 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a X **b** Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? . . . 5 b c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? ... 5 c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization X solicit any contributions that were not tax deductible as charitable contributions? 62 b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?... 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 7 a services provided to the payor? 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 7 c e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?.... 7 € 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 as required? 7 g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 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 9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? 9 a 9 b **b** Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 b 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders 11 a **b** Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11 b 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 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a 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.

13b 13c

b Enter the amount of reserves the organization is required to maintain by the states in

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

which the organization is licensed to issue qualified health plans

Part VIII 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. Check if Schedule O contains a response or note to any line in this Part VI Section 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 1 b 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? ... See Schedule 0 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 since the prior Form 990 was filed?. . . X 4 Did the organization become aware during the year of a significant diversion of the organization's assets? ... X 5 X 6 7 a 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? Х **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? X **b** Each committee with authority to act on behalf of the governing body? X 86 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..... Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. No X 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 operations are consistent with the organization's exempt purposes?...... 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12 a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12 b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in 120 13 Did the organization have a written whistleblower policy? Х 13 14 Did the organization have a written document retention and destruction policy? ... X 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? a The organization's CEO, Executive Director, or top management official. ... 15 a **b** Other officers or key employees of the organization..... X 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 taxable entity during the year? . . . 16 a 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 organization's exempt status with respect to such arrangements? . Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ None S.C. 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. Own website Another's website X Upon request Other (explain in Schedule O) Describe in Schedule 0 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. See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records: SC Farm Bureau 724 Knox Abbott Drive Cayce SC 29033 803-936-4676

Form 990	(2015)	SPARTANBURG	COUNTY	FARM	BLIBETI
	(2010)	SLUCIANDORG	COUNTY	LUMI	DUNEAU

57-0345437

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

Check if Schedule O contains a response or note to any line in this Part VII .

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.

|X| Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

				(C)						
(A) Name and Title	(B) Average hours per	IS	both : dire	do no oox, u an of ctor/t	ficer truste			(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	per week (list any hours 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)	from the organization and related organizations
(1) Paul Dean Abbott, Jr.	0.3									_
Director	0	X						0.	0.	0.
(2) Robert Sellars	0.3	١.,								•
Director	0	X		\dashv			_	0.	0.	0.
(3) Kent Brockman	_0.3_	٠,,						•		•
State Director	0	Х						0.	0.	0.
(4) Ben Gramling, II	0.3	x						_	0	0
State Director (5) Wendell K. Brockman, Jr.	0.3		┝╌┼	-+			\dashv	0.	0.	0.
Director	0.3	x						0.	0.	0.
(6) Frank Nutt	0.3	1.	\vdash	\dashv				0.1	0.	<u> </u>
Director	0	х						o.	0.	0.
(7) Anthony Owens	0.3								3.	
Director	0	X						0.1	0.	0.
(8) Tim Seay	0.3									
Director	0	Х						0.	0.	0.
(9) Hugh Waldrop	0.3									
Director	0	Х						0.	0.	0.
(10) Sammy Woodruff	0.3									
Director	0	Х		_			_	0.	0.	0.
(11) Lynne Farr	_0.3_				- 1		- 1			
Director	0	X		_				0.	0.	0.
(12) Ginger Bowen	0.3					1				
Director	0	Х		4	_		_	0.	0.	0.
(13) Myles Wilson	0.3			_					_	_
Vice President	0		 	X				0.	0.	0.
(14) Whitney Farr	_0.3_			,						^
Secretary/Treas	0			X		ļ		0.	0.	0.

Rain File Section A. Officers, Directors, 110	r	\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			_		4110	i ingliost con	ponsatou Emp	(continued)
(A) Name and title	Average hours per	box.	unles	heck ss pe	ition more	than is both or/trus	h an l	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount 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)	compensation from the organization and related organizations
(15) Harriett Belue President	_0.3_	-		X				0.	0.	0.
(16)										
(17)		-								
(18)		-								
(19)										
(20)									,	
(21)										
(22)										
(23)										
(24)										
(25)										
1 b Sub-total .		لــــــــــــــــــــــــــــــــــــ					-	0.	0.	0.
c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)							▶	0.	0.	0.
2 Total number of individuals (including but not limited					who	recei	ved			
from the organization 0									 	Yes No
3 Did the organization list any former officer, direction line 1a? If 'Yes,' complete Schedule J for suc	tor, or tru <i>h ındivıdu</i>	stee, <i>al</i>	key	em	ploy	/ee, (or h	ighest compensat	ed employee	3 X
4 For any individual listed on line 1a, is the sum of the organization and related organizations greate such individual	er than \$1	e cor 50,00	npei 00?	nsai <i>If 'Y</i>	tion <i>'es'</i>	and com	othe plet	er compensation f e Schedule J for	rom	4 X
5 Did any person listed on line 1a receive or accrufor services rendered to the organization? If 'Yes		satio	n fro	om a Jule	any <i>J fo</i>	unrel r suc	late h p	d organization or	ındıvıdual	5 X
Section B. Independent Contractors										
 Complete this table for your five highest compen- compensation from the organization. Report compen 	sated inde isation for	epend the ca	dent alend	con dar y	ntrac year	tors endi	that	t received more th vith or within the or	ian \$100,000 of ganization's tax yea	r
(A) Name and business add	ress							Description (of services	(C) Compensation
2 Total number of independent contractors (including t		ited to	o tho	se I	isted	d abo	ve)	who received more	than	. 1522 1840 1840 1840 1840 1840 1840 1840 1840
\$100,000 of compensation from the organization	- 0							·	150	5 000 (0015)

100	Check if Schedule O contains a response or no	te to any line in this Part VI	11		П
	The second of th	Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts nts	1 a Federated campaigns 1 a		A Company of the last	Mark March Street	ACMING AND ADMINISTRATION OF THE SECOND
ar our	b Membership dues . 1b 92	,138.	and the second		7.70
S, C	c Fundraising events 1 c			2.2	建筑 清洁 点
Giffi	d Related organizations 1 d		The state of the s	Today was	
ns,	e Government grants (contributions) 1 e		Transmission in the last of th	and the straint of the same of	CONTRACTOR OF THE PARTY OF
utio her S	f All other contributions, gifts, grants, and similar amounts not included above 1 f	112 PHILIPPIN		Date of the	TO SERVICE
Contributions, Gifts, Grants and Other Similar Amounts	g Noncash contributions included in lines 1a-1f: \$	TO A TO THE STATE OF THE STATE	A STATE OF THE STA	T 25 T 2	Tibellete kastropieles
<u>S</u>		▶ 92,138.	The state of the s		demonstrates de c
Program Service Revenue	Business				time in decrease de la companya dela companya dela companya de la companya de la companya de la companya dela companya de la companya de la companya de la companya de la companya dela companya de la co
eve	2a Activities Income 900099	146.		146.	
Эе Н	b Contribution-Awards 900099				
ervi	d				
S =	e				
gra	f All other program service revenue		- 11 - 12 - 12 - 12 - 12 - 12 - 12 - 12		
P	g Total. Add lines 2a-2f.	146.		Thursday a	er gestelige vitte
	3 Investment income (including dividends, interest	and			the fact that the fact of the spirit of the
	other similar amounts)	507.			507.
	4 Income from investment of tax-exempt bond proc 5 Royalties	eeas.			
	(i) Real (ii) Pe	rsonal	Parateur .		San and Commence of Commence
	6a Gross rents 30, 420.	SERVICE AND ADDRESS OF THE PARTY OF THE PART	A PROPERTY AND A PERSON NAMED IN		THE LOSS.
	b Less: rental expenses	PACKAGES :	The second		de week make a first
	c Rental income or (loss) . 30,420.				erio de la companya d
	d Net rental income or (loss)	▶ 30,420.			30,420.
	7 a Gross amount from sales of (i) Securities (ii) C	ther State Live	Contract Con	TANGARA	The state of the s
	assets other than inventory	The first of the first	The second second	Waller of the Company	i sala Winasawa s
	b Less: cost or other basis and sales expenses	The section of the se		Witten Commence	
	c Gain or (loss).	A SANGER AND PARTY.	TOTAL STREET		MATERIAL SECTION
	d Net gain or (loss)	•		186. 4 110 . 189. 195.	
nue	8 a Gross income from fundraising events (not including . \$	27.8 (1881) 24.1 (1882) 24.1 (1882) 24.1 (1882)		The State of the S	The state of the s
Other Revenu	of contributions reported on line 1c).	A A Maria Comment	AMARIA AMARIANA	Assessed to the second	THE SALES OF THE S
Ä	See Part IV, line 18 a		ALCOHOLY SE	Constitution (in a second	Park Manager 1, 2, 400
돮	b Less: direct expenses . b			TE ESTABLES	
0	c Net income or (loss) from fundraising events		AND STREET, SPICE		
	9a Gross income from gaming activities. See Part IV, line 19 a	" The State of	TO WANTED	Marie III	graphers in the second
	b Less: direct expenses b	A CONTRACTOR OF THE PARTY OF TH	The second		and the second second
	c Net income or (loss) from gaming activities				
	10a Gross sales of inventory, less returns and allowances	4.464	Control of the Contro	Maria de la companione de	Santa e e
	b Less: cost of goods sold b		504		
	c Net income or (loss) from sales of inventory	>	***************************************	M. 1 14-15	
	Miscellaneous Revenue Business	Code %	A CONTRACTOR OF THE PARTY OF TH	TO AND DE	F North Park 1
	11a Service Fees 524298				
	b Miscellaneous Income 900099				
	d All other revenue				
	a Tatal Add Imag 11a 11d				
	12 Total revenue. See Instructions	123,211.	0.	146.	30,927.
		1 163,611.		140.	30,341.

	330 (2013) SPARIANBURG COUNTY FA			57-034	15437 Page II
Pak	Statement of Functional Expens	ses			
Sect	ion 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All ot	her organizations must c	omplete column (A).	
	Check if Schedule O contains a re	esponse or note to any	Ine in this Part IX .		
	not include amounts reported on lines 7b, 8b, 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 domestic organizations and domestic governments. See Part IV, line 21	- Marie - Mari	·	A. There	The second
2	Grants and other assistance to domestic individuals. See Part IV, line 22.				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16			Total Control	MARTINE AND
4	Benefits paid to or for members,				
5	Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes .				
11	Fees for services (non-employees):				
а	Management				•
b	Legal				
c	: Accounting .				
	Lobbying				
	Professional fundraising services. See Part IV, line 17			all a series of the series of	· · · · · · · · · · · · · · · · · · ·
	Investment management fees		**************************************		
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0.). Advertising and promotion				
13	Office expenses	1,577.	· · · · · · · · · · · · · · · · · · ·	1,577.	
14	Information technology		···· ·	2/0///	
15	Royalties				
16	Occupancy	20,410.	20,410.		
17	Travel	12,937.	12,937.		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	12,937.	12,937.		
	Conferences, conventions, and meetings	3,715.	3,715.		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance Other expenses. Itemize expenses not	809.		809.	
24	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.)				
	MANAGEMENT FEES	18,004.	18,004.		
b	STATE DUES	15,372.	15,372.		
	Postage and Shipping	3,545.		3,545.	
	CONTRIBUTIONS	2,180.	2,180.		
	All other expenses	41.	41.		
	Total functional expenses. Add lines 1 through 24e	78,590.	72,659.	5,931.	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)	.0,030.	12,000.	3,331.	

Part 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 Cash - non-interest-bearing . 1 2 Savings and temporary cash investments. 129,662 2 74,094. 3 Pledges and grants receivable, net . . . 3 4 Accounts receivable, net 4 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 Notes and loans receivable, net . 7 8 9 9 Prepaid expenses and deferred charges **10a** Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 398,154 10b 398,154 398,154 Investments — publicly traded securities..... 11 11 Investments - other securities. See Part IV, line 11 12 12 Investments - program-related. See Part IV, line 11 13 13 14 14 Intangible assets 15 15 Other assets. See Part IV, line 11 100,187 Total assets. Add lines 1 through 15 (must equal line 34) 16 16 527,815 572,436 17 Accounts payable and accrued expenses 17 Grants payable. 18 18 19 Deferred revenue. 19 20 20 Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 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 23 Unsecured notes and loans payable to unrelated third parties..... 24 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 25 Total liabilities. Add lines 17 through 25 26 0 Organizations that follow SFAS 117 (ASC 958), check here ▶ and complete or Fund Balances lines 27 through 29, and lines 33 and 34. Unrestricted net assets 27 Temporarily restricted net assets. . . . 28 Permanently restricted net assets. 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund. ... 31 32 Retained earnings, endowment, accumulated income, or other funds 527,815 572,436. 33 Total net assets or fund balances 33 572,436. 527,815 Total liabilities and net assets/fund balances. 34 572,436. 527,815

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Form 990 (2015)

Forn	1990 (2015) SPARTANBURG COUNTY FARM BUREAU	57-03	345437	Pa	age 12
Pai	t XIII Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	• • •			· 🗌
1	Total revenue (must equal Part VIII, column (A), line 12)	· L	1	123,2	211.
2	Total expenses (must equal Part IX, column (A), line 25)	. [2	78,!	590.
3	Revenue less expenses. Subtract line 2 from line 1.		3	44,0	621.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	[4	527,8	815.
5	Net unrealized gains (losses) on investments		5		
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)	L	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))		0	572,4	<u> 136.</u>
r,a	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: X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.				l in
2 8	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 rev	viewed (nn a	COAT TO	AN
	separate basis, consolidated basis, or both:	newca c	,,, u	duter	
	Separate basis Consolidated basis Both consolidated and separate basis				
ı	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 se	eparate			
	basis, consolidated basis, or both:			4.3	
	Separate basis Consolidated basis Both consolidated and separate basis			Alexander	34
•	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?	audıt,		2 c	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.				#
3	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir Audit Act and OMB Circular A-133?	ngle		3 a	X
ı	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the require	ed audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3 b	<u> </u>
BAA				Form 990	(2015)

BAA

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

Complete if the organization answered 'Yes' on Form 990,
Part IV, line 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

2015

Operato Publice Inspection

Complete in the organization answered 'Yes' on Form 990, Part IV, line 6. Total number at end of year
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 of grants from (during year) . 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization in property, subject to the organization's exclusive legal control? 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?
2 Aggregate value of contributions to (during year). 3 Aggregate value of grants from (during year). 4 Aggregate value at end of year
Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring mermissible private benefit? Conservation Easements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 7. Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Preservation of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Total number of conservation easements. Total number of conservation easements on a certified historic structure included in (a) A Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of states where property subject to conservation easement is located Number of states where property subject to conservation easement is located Number of states where property subject to conservation easement is located Number of states where property subject to conservation easements included in online periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
Aggregate value at end of year
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisors, or for any other purpose conferring impermissible private benefit?
are the organization's property, subject to the organization's exclusive legal control?
for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?
Conservation Easements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Protection of natural habitat Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. a Total number of conservation easements. b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► 4 Number of states where property subject to conservation easement is located ► 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
Complete if the organization answered 'Yes' on Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Protection of natural habitat Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. a Total number of conservation easements. b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 4 Number of states where property subject to conservation easement is located 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
Preservation of land for public use (e.g., recreation or education) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Preservation of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Total number of conservation easements. b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of states where property subject to conservation easement is located Number of states where property subject to conservation easement is located Number of states where property subject to conservation easement is located Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
Preservation of land for public use (e.g., recreation or education) Protection of natural habitat Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. 4 Total number of conservation easements. 5 Total acreage restricted by conservation easements 6 Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 7 Number of states where property subject to conservation easement is located 8 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 1 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
Protection of natural habitat Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. 4 Total number of conservation easements. 5 Total acreage restricted by conservation easements 6 Number of conservation easements on a certified historic structure included in (a) 6 Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 7 Number of states where property subject to conservation easement is located Preservation of a certified historic structure including in the form of a conservation easement and the End of the Tax 2 a Held at the End of the Tax 2 a 2 b C undered for the Tax 2 a C undered for the End of the Tax 2 a C undered for the End of the Tax 2 a C undered for the Tax 2 a C
Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. A Total number of conservation easements.
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. ### Held at the End of the Tax ### Total number of conservation easements. #### Total acreage restricted by conservation easements ### C Number of conservation easements on a certified historic structure included in (a). ### d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register ### Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ### Number of states where property subject to conservation easement is located ### Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ### Total number of conservation easements included in (c) acquired after 8/17/06, and not on a historic 2 d
a Total number of conservation easements. b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► Number of states where property subject to conservation easement is located ► Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
a Total number of conservation easements
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and enforcement of the conservation easements it holds?
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting conservation easements.
Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 8.
1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
(i) Revenue included on Form 990, Part VIII, line 1
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:
a Revenue included on Form 990, Part VIII, line 1.
b Assets included in Form 990, Part X

0.1.1.1.2.45000.0015003.001				* 77 00		
Schedule D (Form 990) 2015 SPART: Part 11 Organizations Maintain				57-034		Page 2
3 Using the organization's acquisition, items (check all that apply):						пиец)
a Public exhibition		d 🗀 Loan o	or exchange programs			
b Scholarly research		e Other	or exchange programs			
c Preservation for future general	tions					
4 Provide a description of the organiza		d avalain how they	further the organization	'e avamnt nurnaea in		
Part XIII.	don's conections and	a explain now they	Turtiler the organization	s exempt purpose in		
5 During the year, did the organizati to be sold to raise funds rather that					Yes	No
Escrow and Custodial line 9, or reported an a	Arrangements. mount on Form	Complete if the 1990, Part X,	he organization an line 21.	swered 'Yes' on Fo	orm 990, P	art IV,
1 a Is the organization an agent, trust on Form 990, Part X?. b If 'Yes,' explain the arrangement i				er assets not included	Yes	No
Dir Too, oxplain ale arrangement	in an in and con	ipioto the followin	ig table!		Amount	
c Beginning balance				1 c	7 11 10 41 10	
d Additions during the year				1 d		
e Distributions during the year				1 e		
f Ending balance				16		
2 a Did the organization include an an				account liability?	Yes	No
b If 'Yes,' explain the arrangement i						
Pare Visi Endowment Funds. Co	mplete if the or	rganization an	swered 'Yes' on Fo	orm 990 Part IV II	ne 10	
Lilaoviii circ i anasi o	(a) Current year	(b) Prior year			(e) Four y	ears back
1 a Beginning of year balance	(a) carrone your	(3) 1 1101) 001	(0) 1110) 0210 240	(u) Imoo jouro suon	(0) 1 0)	
b Contributions					1	
S Not investment cornings going						
c Net investment earnings, gains, and losses						
d Grants or scholarships						
e Other expenditures for facilities						
and programs						
f Administrative expenses					<u> </u>	
g End of year balance		<u> </u>		<u></u>		
2 Provide the estimated percentage	_	end balance (line	e 1g, column (a)) held	as:		
a Board designated or quasi-endowme		⁸				
b Permanent endowment	%	%				
c Temporarily restricted endowment		`				
The percentages on lines 2a, 2b, and	a ze snoula equal 10	U%.				
3 a Are there endowment funds not in th	e possession of the	organization that a	re held and administere	d for the	Yes	s No
organization by: (i) unrelated organizations						5 NO
,,		• • • •			3a(i)	
• • • • • • • • • • • • • • • • • • • •					3a(ii)	
b If 'Yes' on line 3a(ii), are the relate	=	•			3b	i
4 Describe in Part XIII the intended		ation's endowme	nt tunas.			
Complete if the organiz	• •	l 'Yes' on Forr	n 990, Part IV, line	e 11a. See Form 99	0, Part X,	line 10.
Description of property	(a) Cos	st or other basis nvestment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book	value
1 a Land			6,500.	September Park		6,500.
b Buildings			201,871.		20)1,871.
c Leasehold improvements			121,798.			21,798.
d Equipment						

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

398,154. Schedule **D** (Form 990) 2015

67,985.

67,985.

Pag VIII	Investments -	- Other Securities.		N/A		
		e organization answered		<u> </u>		
	·	egory (including name of security)	(b) Book value	(c) Method of valuat	ion: Cost or end-of-	-year market value
	ial derivatives /-held equity interes					
(3) Other		•				
(A) (B)						
<u>(c)</u>						
(D)			· . · . · . · . · . · . · · · · ·			
(E)						
(F)						
(G)						
(H)						
<u>(l)</u>			· · · · · · · · · · · · · · · · · · ·			
		990, Part X, column (B) line 12.) .		T Maring	****	Maria Company
HEIDWIN.	Complete if the	– Program Related. e organization answered	'Yes' on Form 990	N/A). Part IV. line 11c.	See Form 99	90. Part X. line 13.
	(a) Description of		(b) Book value	(c) Method of valuation		
(1)						
(2)						
(3)						
(4)						
(5)						
(6)		A				<u> </u>
<u>(7)</u>						
(8) (9)			<u> </u>			
(10)		<u></u>				
	nn (b) must equal Form	990, Part X, column (B) line 13.)). Carrier and S	CAMPOND VI	W. Barrer
Péta 2	Other Assets.	•	LD(l F 00)	Doubly line 11d	S	00 David V. Juna 15
	Complete if th	e organization answered	scription	J, Part IV, line I Id.	See Form 95	(b) Book value
(1) INV	ESTMENT LLC	(a) 50	SCIPTION			100,187.
(2)		<u> </u>				
(3)						
(4)						
(5) (6)						
(7)						
(8)						
(9)						
(10)						
		al Form 990, Part X, column (l	3) line 15.) .		·	100,187.
Part XX	Other Liabiliti	l es. rganization answered 'Yes' on F	orm 990 Part IV line 1	le or 11f See Form 990	Part X line 25	
		ption of liability	(b) Book value	10 01 111. 000 1 0111 000;	Ture A, time 20	4.5
	eral income taxes			The second secon	10000	
(2)					13.43	
(3)				- Lander Fred	A PART OF THE PART	and the second second
(4)					116	
(6)						
(7)						
(8)				77997	4 44	185 180
(9)					and the second	
(10)				The Park of the Control of the Contr	A CONTRACTOR OF THE PARTY OF TH	14 PAGE 1
	mn (h) must savel Form	990, Part X, column (B) line 25.)	•			
		s. In Part XIII, provide the text of the fo		inancial statements that renorts	the organization's	liability for uncertain
•	•	Check here if the text of the footnote	· · · · · · · · · · · · · · · · · · ·			

Schedule D (Form 990) 2015	SPARTANBURG	COUNTY	FARM	BUREAU

57-0345437

Page 4

Partixing Reconciliation of Revenue per Audited Financial Statements	s With Revenue per Return. N/A	
Complete if the organization answered 'Yes' on Form 990, Pa	art IV, line 12a.	
1 Total revenue, gains, and other support per audited financial statements	1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments	2a	
b Donated services and use of facilities	2b	
c Recoveries of prior year grants	2 c	
d Other (Describe in Part XIII.).	2 d	
e Add lines 2a through 2d	2e	
3 Subtract line 2e from line 1	3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	i i	
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIII.)	4 b	
c Add lines 4a and 4b	4c	
c Add lines 4a and 4b		
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	ts With Expenses per Return. N/A	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	ts With Expenses per Return. N/A art IV, line 12a.	
Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statemen Complete if the organization answered 'Yes' on Form 990, Pa	ts With Expenses per Return. N/A art IV, line 12a.	
 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered 'Yes' on Form 990, Part I, line 12.) Total expenses and losses per audited financial statements 	ts With Expenses per Return. N/A art IV, line 12a.	
 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered 'Yes' on Form 990, Part I Total expenses and losses per audited financial statements	ts With Expenses per Return. N/A art IV, line 12a.	
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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 XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

BAA

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.

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

OMB No. 1545-0047

2015

Open to Públic.
Inspections

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

57-0345437

SPARTANBURG COUNTY FARM BUREAU

Form 990, Part III, Line 4d - Other Program Services Description

Fund and engage organization's volunteers (members) to promote agricultural and consumer education through various state and local agricultural literacy programs.

Work through organization's volunteers (members) to prompt conversations about agriculture through promotional, educational and professional events and other opportunities.

Form 990, Part VI, Line 2 - Business or Family Relationship of Officers, Directors, Etc.

Director

Family Relationship:-

Kent Brockman; Wendell K. Brockman, Jr.

Lynne Farr; Whitney Farr

Form 990, Part VI, Line 11b - Form 990 Review Process

There is no current policy for the organization to review the Form 990.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

No documents available to the public.