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**Short Form**  
**Return of Organization Exempt From Income Tax**  
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code  
(except black lung benefit trust or private foundation)

2008

Department of the Treasury  
Internal Revenue Service

► Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form.

► The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public  
Inspection

<b>A For 2008 calendar year, or tax year beginning</b> OCTOBER 01, 2008, and ending SEPTEMBER 30, 2009		
<input type="checkbox"/> Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C Name of organization</b> Weld County Farm Bureau  <b>No &amp; street (or P O box, if mail is not delivered to street address)</b> 610 Cheyenne Ave  <b>City or town, state or country, and ZIP + 4</b> Eaton CO 80615	<b>D Employer Identification number</b> 84-0386659
	<b>E Room/ suite</b>  <b>F Telephone number</b> (970) 454-1772	
		<b>G Group Exemption Number</b> ►

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

**I Website:** ► N/A

**J Organization type** (check only one) --  501(c)(5) (insert no.) 4947(a)(1) or 527

**K Check** ►  if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return

**L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$1,000,000 or more, file Form 990 instead of Form 990-EZ ► \$ -13,857**

<b>Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances</b> (See the instructions for Part I)		
<b>REVENUE</b>	1 Contributions, gifts, grants, and similar amounts received	1
	2 Program service revenue including government fees and contracts	2
	3 Membership dues and assessments	3 8,866
	4 Investment income	4 18
	5a Gross amount from sale of assets other than inventory	5a -22,772
	b Less cost or other basis and sales expenses	5b
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach schedule)	5c -22,772
	6 Special events and activities (complete applicable parts of Schedule G) If any amount is from <b>gaming</b> , check here ► <input type="checkbox"/>	
	a Gross revenue (not including \$ _____) of contributions reported on line 1)	6a
b Less direct expenses other than fundraising expenses	6b	
c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)...	7a	
7a Gross sales of inventory, less returns and allowances	7a	
b Less cost of goods sold	7b	
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
8 Other revenue (describe ► See attachment #2)	8	
9 <b>Total revenue.</b> All lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9 -13,857	
<b>EXPENSES</b>	10 Grants and similar amounts paid (attach schedule)	10
	11 Benefits paid to or for members	11
	12 Salaries, other compensation, and employee benefits	12 6,000
	13 Professional fees and other payments to independent contractors	13 350
	14 Occupancy, rent, utilities, and maintenance	14 1,065
	15 Printing, publications, postage, and shipping	15
	16 Other expenses (describe ► See attachment #3)	16 23,641
	17 <b>Total expenses.</b> Add lines 10 through 16	17 31,056
<b>NET ASSETS</b>	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18 -44,913
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19 430,038
	20 Other changes in net assets or fund balances (attach explanation)	20
	21 Net assets or fund balances at end of year Combine lines 18 through 20	21 385,125

<b>Part II Balance Sheets.</b> If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ			
(See instructions for Part II)			
<b>ASSETS</b>	22 Cash, savings, and investments	(A) Beginning of year	(B) End of year
	23 Land and buildings	430,038	22 385,125
	24 Other assets (describe ► )	23	
	25 <b>Total assets</b>	24	
	26 <b>Total liabilities</b> (describe ► )	430,038	25 385,125
	27 <b>Net assets or fund balances</b> (line 27 of column (B) must agree with line 21)	0	26 0
		430,038	27 385,125

For Privacy Act and Paperwork Reduction Act Notice, see the Instruction for Form 990.

Form 990-EZ (2008)





**Part V Other Information** (Note the statement requirements in the instructions for Part VI)

	<b>Yes</b>	<b>No</b>
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33	X
34 Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	34	X
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T		
a Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?	35a	X
b If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	35b	X
36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N	36	X
37a Enter amount of political expenditures, direct or indirect, as described in the instructions ► <b>37a</b> 0		
b Did the organization file <b>Form 1120-POL</b> for this year?	37b	X
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee <b>or</b> were any such loans made in a prior year and still unpaid at the start of the period covered by this return?		
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	
39 Section 501(c)(7) organizations Enter.		
a Initiation fees and capital contributions included on line 9	39a	
b Gross receipts, included on line 9, for public use of club facilities	39b	
40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ► _____, section 4912 ► _____, section 4955 ► _____		
b Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I	40b	X
c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		
d Enter amount of tax on line 40c reimbursed by the organization		
e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T		
41 List the states with which a copy of this return is filed ► <b>NONE</b>		
42a The books are in care of ► <b>See attachment #8</b> Telephone no ► _____ Located at ► _____ ZIP + 4 ► _____		
b 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)? If "Yes," enter the name of the foreign country ► _____ See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts</b> .	42b	X
c At any time during the calendar year, did the organization maintain an office outside of the U S ? If "Yes," enter the name of the foreign country ► _____	42c	X
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of <b>Form 1041</b> -- Check here ► <b>43</b> and enter the amount of tax-exempt interest received or accrued during the tax year		
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44	X
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45	X

**Part VI** **Section 501(c)(3) organizations only.** All section 501(c)(3) organizations must answer questions 46-49 and complete the tables for lines 50 and 51

46 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 Yes  No   
46

47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II 47

48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 48

49a Did the organization make any transfers to an exempt non-charitable related organization?  
b If "Yes," was the related organization(s) a section 527 organization? 49a  49b

50 Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None" X

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$100,000 ►				

51 Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None" X

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		
Total number of other independent contractors each receiving over \$100,000 ►		

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge		
	<span style="display: block; text-align: right;">3/29/2010</span> <span style="display: block; text-align: right;">Signature of officer</span> <span style="display: block; text-align: right;">Type or print name and title</span>		
Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>
	H&R Block	3/26/10	Preparer's Identifying No. (See instr.) P00211343
	Firm's name (or yours if self-employed), address, and ZIP + 4	EIN 26-0254423	
	3618 W 10th St Greeley, CO 80634 -	Phone no. 970-352-4390	

May the IRS discuss this return with the preparer shown above? See instructions

## SCHEDULE OF GAIN/LOSS FROM SALE OF ASSETS OTHER THAN INVENTORY

Attachment 1: page 1 - 990-EZ Page 1, Part I, line 5

Open to Public Inspection For Calendar year 2008, or tax year period beginning 10-01-2008

National Curriculum Framework for School Education

**Name of Organization** Weld County Farm Bureau  
**Employer Identification Number** 84-0386659

Name of Security or Description of Property

114

Name of Security or Description of Property	Acquisition Date	How Acquired	Date Sold

## **SCHEDULE OF OTHER REVENUE**

Attachment 2: page 1 - 990-EZ Page 1, Part I, Line 8

**SCHEDULE OF OTHER EXPENSES**

Attachment 3: page 1 - 990-EZ Page 1, Part I, Line 16

Open to Public Inspection	For calendar year 2008 or tax period beginning	10-01-2008, and ending	09-30-2009.
Name of Organization Weld County Farm Bureau		Employer Identification Number 84-0386659	
Description of Other Expenses		Amount	
Annual Meeting			2,312
Board Meeting Expenses			2,189
Delegate Expenses			6,751
Policy Developement			1,013
Community Relations			4,883
Insurance			100
Fees			6
Memberships			41
Donations			2,316
Educational exp			500
Membership Billing			1,037
Legislative meetings			305
Travel Exp			1,646
Special Programs			105
Office exp			437
		Total	23,641

## PRIMARY EXEMPT PURPOSE

Attachment 4: page 1 - 990-EZ Page 2, Part III

Open to Public Inspection	For calendar year 2008 or tax period beginning	10-01	, and ending	09-30-2009.
Name of Organization Weld County Farm Bureau				Employer Identification Number 84-0386659

### Primary Purpose

Promotion and education for Agricultural Activities

## PROGRAM SERVICE ACCOMPLISHMENT

Attachment 5: page 1 - 990-EZ Page 3, Part III

Open to Public Inspection	For calendar year 2008 or tax period beginning	10-01-2008, and ending	09-30-2009.
<b>Name of Organization</b> Weld County Farm Bureau		<b>Employer Identification Number</b> 84-0386659	
Part III - Statement of Program Service Accomplishments			
Grants and allocations	Amount includes foreign grants	Program service expenses	5,489
Exempt Purpose Achievements			

Promotion and information about agricultural production activities for the benefit of 723 members.

# CURRENT OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

Attachment 6: page 1 - 990-EZ Page 2, Part IV

Open to Public Inspection	For calendar year 2008 or tax period beginning <b>10-01-2008, and ending</b>			09-30-2009.
<b>Name of Organization</b> Weld County Farm Bureau			<b>Employer Identification Number</b> 84-0386659	
(A) Name and Address	(B) Title and Average Hrs per Week	(C) Compensation (If not paid, enter 0)	(D) Cont to Employee Ben Plans & Def. Comp	(E) Expense Account & Other Allowances
Geenine Ellzey Galeton, CO Lauren Felte Severance, CO Lola Mundt See Comp. Expl. #1 Jon Erickson Galeton, CO Everett Schlotthauer Ft Collins, CO Dennis Mundt Eaton, CO	President 10.00 Vice President 5.00 Secretary/Tre 20.00 Director 3.00 Director 3.00 Director At Large 3.00	0 0 0 6,000 0 0 0 0 0	0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0

## COMPENSATION EXPLANATION

Attachment 7: page 1 - 990-EZ Page 2, Part IV, Officer Compensation Explanation

Open to Public Inspection	For Calendar year 2008, or tax year period beginning 10-01-2008 and ending 09-30-2009	Employer Identification Number 84-0386659
Name of Organization	Explanation	
Weld County Farm Bureau	Name	
Officer Comp. Expln. #1 Lola Mundt	The secretary/treasurer position is allowed compensation due to the amount of time required.	

**BOOKS ARE IN CARE OF**

Attachment 8 - 990-EZ Page 3, Part V, Line 42a

Open to Public Inspection	For calendar year 2008 or tax period beginning	10-01	, and ending	09-30-2009.
<b>Name of Organization</b> Weld County Farm Bureau			<b>Employer Identification Number</b> 84-0386659	
<b>Part V - Line 42a</b>				

Individual Name Lola Mundt

or

Business Name

Street Address 610 Cheyenne Ave

U S Address

Zip code 80615

City Eaton

State CO

or

Foreign Address

City \_\_\_\_\_

Province or State \_\_\_\_\_

Country \_\_\_\_\_

Postal code \_\_\_\_\_

Phone Number (970) 454-1772

Fax Number \_\_\_\_\_

**2008 DETAIL STATEMENTS**

Weld County Farm Bureau  
84-0386659

Page 1

STATEMENT #1 - Professional Fees (990-EZ PG 1 Line 13)

Professional fees.....	350
TOTAL CARRIED TO 990-EZ PG 1 Line 13.....	350