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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 black lung benefit trust or private foundation)

2008

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

_						<u> </u>		<del></del>							
_		For the	e 2008 calen	dar year,	or tax year be	ginning 10/	01	, 20	08, and endi	ng 9/	9/30 , 2009				
Ę	3 (	Check if	applicable		Ī						D Employ	yer Identifi	ication Number		
		Add	lress change	Please use IRS label	ARIZONA	FARM BURE	AU FI	EDERATION			86-	00868	85		
		□ <sub>Nan</sub>	ne change	or print or type.		H HIGLEY		#210			E Teleph	one numbe	er		
		$\vdash$	al return	Sée specific	GILBERT,	AZ 85296					(48	0) 63	5-3600		
		<u> </u>		Instruc-							—\ <u></u>	<del>, , , , , , , , , , , , , , , , , , , </del>			
60		$\vdash$	mination	tions.									2,735	004	
φ——		$\vdash$	ended return		L					Tuz-> 1- 45	G Gross				
		Арр	lication pending	1	and address of prin						a group retui affiliates inc		<b>#</b> '''		
≊.					AS C ABOV						attach a list		uctions) Yes	∐_ No	
$O^{1}$		Tax-	exempt statu	ıs  X  501	(c) (5	)◀ (insert no )		4947(a)(1) or	527	1					
iu -	Tax-exempt status   x  301(c)   3   4947(a)(1) of   327									H(c) Group exemption number ►					
<b>2</b> 1										ation 193	7 <b>M</b> :	State of le	gal domicile AZ	<u>'</u>	
2	Pa	rt I	Summ												
					ganization's m	ission or most	signific	cant activities:	WORK FOR	R THE S	OLUTIO	N OF	AGRICULT	URAL	
			PROBLEMS					_							
350	٤														
	Ē	_	- <b></b>		· ·										
	<u>§</u>	2 (	Check this bo		if the organiza	ation discontin	ued its	operations or d	sposed of m	ore than 2	25% of its	assets			
	Activities & Governance	3 1	Number of vo	otina men	nbers of the ac	verning body	(Part V	I, line 1a)				3		25	
	পু							body (Part VI, I	line 1b)			4		25	
	Ë				yees (Part V,		-					5		13	
	⋛					e if necessary)						6		200	
	¥							e 12, column (C	;)			7 a	338	,399.	
			_			me from Form			•			7 b	25	,417.	
-										F	rior Year		Current Y	ear	
		8 (	Contributions	and aran	nts (Part VIII, I	ine 1h)				<u> </u>	55,8			,060.	
	9									<u> </u>	1,290,			, 439.	
	Revenue	9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)							<u> </u>	158,			,596.		
	ě					), lines 5, 6d, 8					981,			,223.	
								VIII, column (A)	line 12\		2,483,			,318.	
-	_								i, iiie 12)		2, 100,	702.	2,10,	7510.	
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)														
	ļ	14 Benefits paid to or for members (Part IX, column (A), line 4)  15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)								ļ	1 101	120	1 107		
	6	15	Salaries, oth	er compe	nsation, emplo	oyee benefits (	Part IX	, column (A), lir	nes 5-10).		1,121,	138.	1,127	<u>,554.</u>	
	Expenses	16 a f	Professional	fundraisir	ng fees (Part I	X, column (A),	line 1	le)							
	pe	ь-	Total fundrau	sına expe	nses (Part IX.	column (D), lu	ne 25)	<b>&gt;</b>						,	
	ũ		b Total fundraising expenses (Part IX, column (D), line 25) ►  Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f).								898,	174	796,326.		
									`		2,019,				
			•			· · · · · · · · · · · · · · · · · · ·		ımn (A), line 25	)					, 438.	
-	_	19 F	Revenue les	s expense	es. Subtract lin	e 18 from line	12		<u>-</u>		464,				
	0.0										nning of <b>'</b>		End of Y		
	100	20	Total assets	(Part X, I	ine 16).					<u> </u>	6,893,			,051.	
	Net Assots or Fund Balancos	21	Total liabilitie	es (Part X	, line 26)						666,	056.	679	<u>, 258.</u>	
	25	22 1	Net assets o	r fund bal	ances Subtra	ct line 21 from	line 20	)		(	6,227,	073.	6,676	793.	
	Pa	rt II		ure Blo											
_						ve examined this re	turn, incli	uding accompanying based on all informa	schedules and st	atements, and	to the best	of my knov	wledge and belief,	ıt ıs	
			true, correct,	complete	claration of pr	eparer (other than o	officer) is	based on all informat	tion of which pre	parer has any	knowledge	/	•		
	Sig	ın	<b> ►</b> (c	T.	(n her)						4//S /	10			
i	He	re	Signature	of officer	1000					D.	aye /	10			
			<b> </b>							1	/ /				
			Type or p	rint name an	id title	-	· · · · · · · · · · · · · · · · · · ·		<del></del>				<del></del>		
-						<del> </del>			Date	T	Check If	Pre	parer's identifying	number	
	Pai	.a				1				s	elf-	se (se	e instructions)		
	Pre		Preparer's	1	miny (	Mus			3-1-10		mployed	니ҕ	0000744		
		rer's	signature			- J	NT 3	CD2 LC	10110			JPU	0038744		
	Us		Firm's name (					CPA'S							
	On		émployed),			STREET ST		0		E		36-04			
_			address, and ZIP + 4	PHC	ENIX, AZ	85014-121	L3			F	Phone no	(602		05	
ī	May	the IF	RS discuss t	ns return	with the prepa	arer shown abo	ve <sup>7</sup> (s	ee instructions)					X Yes	No	

Form 990 (2008) ARIZONA FARM BUREAU FEDERATION	86-0086885	Page <b>2</b>
Part III Statement of Program Service Accomplishments (see instructions)		
Briefly describe the organization's mission     WORK FOR THE SOLUTION OF AGRICULTURAL PROBLEMS IN ARIZONA		
2 Did the organization undertake any significant program services during the year which were not listed o Form 990 or 990-EZ?		
If 'Yes,' describe these new services on Schedule O	∐ Y€	
3 Did the organization cease conducting, or make significant changes in how it conducts, any program se if 'Yes,' describe these changes on Schedule O	rvices? Ye	es X No
4 Describe the exempt purpose achievements for each of the organization's three largest program service and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants at expenses, and revenue, if any, for each program service reported	es by expenses Section allocations to others	n 501(c)(3) s, the total
4a (Code:) (Expenses \$ including grants of \$) THE ORGANIZATION HAS AS ITS PURPOSE TO REPRESENT, PROTECT AND AD	VANCE THE EDUC	ATIONAL
AND OVERALL INTERESTS OF THOSE ENGAGED IN AGRICULTURE IN THE STAPRESENTLY THERE ARE APPROXIMATELY 19,261 MEMBERS. THE ORGANIZATIONS.	ON HAS TWO PRI	NTED
<b>4b</b> (Code <sup>-</sup> ) (Expenses \$ including grants of \$)	(Revenue \$	)
4c (Code:) (Expenses \$ including grants of \$)	(Revenue \$	)
4d Other program services (Describe in Schedule O )		
(Expenses \$ including grants of \$ ) (Revenue		
4e Total program service expenses ► \$ (Must equal Part IX, Line 25, column	( <i>P)                                    </i>	

Yes No

Part IV

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?	2		$\frac{\Lambda}{X}$
	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? If 'Yes,' complete Schedule C, Part II.	4	$\frac{\Lambda}{}$	
	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III	5		х
	Did the organization maintain any donor advised funds or any accounts where 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, 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		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		<u>X</u>
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25° If 'Yes,' complete Schedule D, Parts VI, VIII, IX, or X as applicable.	11	Х	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14 a	a Did the organization maintain an office, employees, or agents outside of the US?	14a		Х
ŀ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If 'Yes,' complete Schedule F, Part I	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III	16		Х
	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I	17		X
	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		X
	Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		X
20 21	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III  Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete	22		
2J	Schedule J	23	Х	
24 a	a 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, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K. If 'No,'go to question 25.	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
•	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		
c	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) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		
ŧ	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If 'Yes,' complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27_		Х
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Form 990 (2008)

Part IV Checklist of Required Schedules (continued) Yes No During the tax year, did any person who is a current or former officer, director, trustee, or key employee a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If 'Yes,' complete Schedule L, Part IV 28a Х b Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' complete 28b Х Schedule L, Part IV **c** Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? *If 'Yes,' complete Schedule L, Part IV* Х 28c Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 Х Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 Х contributions? If 'Yes,' complete Schedule M Х 31 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete 32 Х Schedule N, Part II. 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, Parts II, III, IV, and V, 34 Х 34 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2 35 35 Х Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2 36

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

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Statements Regarding Other IRS Filings and Tax Compliance Part V Yes No 1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S 12 Information Returns Enter -0- if not applicable 1 a 1 b 0 b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 1 c Х (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 13 Х 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by Х this return? 3 a b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 3b Х 4a 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) 4a **b** If 'Yes,' enter the name of the foreign country: **>** See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts Х 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Х 5b b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5 c Х 6a 6a Did the organization solicit any contributions that were not tax deductible? b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible? 6 b 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75? 7 b b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file 7с Form 82827 7 d d If 'Yes,' indicate the number of Forms 8282 filed during the year e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 7 e benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 71 g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? **7** q h For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7h Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 92 **b** Did the organization make any distribution to a donor, donor advisor, or related person? 9Ь 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 10b 11 Section 501(c)(12) organizations. Enter a Gross income from other 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

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Form 990 (2008)

12:

12b

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year

Part VI Governance, Management and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Se	ction A.	Governing Body and Management					
	For each processe	'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, on changes in Schedule O. See instructions	describe the circumstances,		Yes	No	
1	a Enter the	number of voting members of the governing body	1a 25				
	<b>b</b> Enter the	number of voting members that are independent	<b>1b</b> 25			,	
2	P. Did any of officer, di	fficer, director, trustee, or key employee have a family relationship or a business re rector, trustee or key employee?	lationship with any other	2_		_X_	
3	Did the o	rganization delegate control over management duties customarily performed by or us, directors or trustees, or key employees to a management company or other person	inder the direct supervision on?	3_		Х	
4		rganization make any significant changes to its organizational documents prior Form 990 was filed?		4		X	
5	_	rganization become aware during the year of a material diversion of the organization	n's assets?	5		Х	
6		organization have members or stockholders? SEE SCHEDULE O		6	Х		
7	a Does the	organization have members, stockholders, or other persons who may elect one or report of the second	more members of the	7a	Х		
	<b>b</b> Are any decisions of the governing body subject to approval by members, stockholders, or other persons?						
8	8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:						
	a The gove	rning body?		8a	Χ		
	<b>b</b> Each con	nmittee with authority to act on behalf of the governing body?		8ь	Х		
9	a Does the	organization have local chapters, branches, or affiliates?		9a		<u>X</u>	
		loes the organization have written policies and procedures governing the activities of the organization?	of such chapters, affiliates,	9Ь			
10	Was a co describe	py of the Form 990 provided to the organization's governing body before it was filed in Schedule O the process, if any, the organization uses to review the Form 990 $^\circ$	12 All organizations must EE SCHEDULE 0	10	Х		
11	organizal	iny officer, director or trustee, or key employee listed in Part VII, Section A, who callion's mailing address? If 'Yes,' provide the names and addresses in Schedule O	nnot be reached at the	11		Х	
Se	ction B.	Policies			· · ·		
	N - D 41	and the second s		12a	Yes	No	
14		organization have a written conflict of interest policy? If 'No,' go to line 13		124			
	to conflic			12b	Х		
	c Does the Schedule	organization regularly and consistently monitor and enforce compliance with the pool of how this is done SEE SCHEDULE O	licy If 'Yes,' describe in	12c	Х		
		organization have a written whistleblower policy?		13	X		
14		organization have a written document retention and destruction policy?		14	Х		
15	Did the p persons,	rocess for determining compensation of the following persons include a review and comparability data, and contemporaneous substantiation of the deliberation and dec	approval by independent cision			1	
	_	nization's CEO, Executive Director, or top management official?		15a	X		
		cers of key employees of the organization? SEE SCHEDULE O		15b	X		
		the process in Schedule O (see instructions)				,	
16	entity du	rganization invest in, contribute assets to, or participate in a joint venture or similar ring the year?		16a		X	
	b If 'Yes,' h in joint ve status wi	ias the organization adopted a written policy or procedure requiring the organization enture arrangements under applicable federal tax law, and taken steps to safeguard th respect to such arrangements?	to evaluate its participation the organization's exempt	16b			
Se	ction C.	Disclosures					
17	List the s	tates with which a copy of this Form 990 is required to be filed - AZ					
18	Section 6	104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and Indicate how you make these available. Check all that apply	nd 990-T (501(c)(3)s only) av	/aılabl	e for p	public	
Own website Another's website X Upon request							
19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest p statements available to the public. SEE SCHEDULE O					nd fina	encial	
20 State the name, physical address, and telephone number of the person who possesses the books and records of the ord ► ARIZONA FARM BUREAU FEDERATION 325 SOUTH HIGLEY ROAD GILBERT, AZ 85296						5-36	
		<u> </u>					

#### Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Part VII **Employees, and Independent Contractors**

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- 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) or 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

Check this box if the organization did no	ot compen	sate a	ny c	office	er, o	directo	or, tr	ustee, or key employe	e	
(A)	(B)				c)			(D)	(E)	(F)
Name and Title	Average hours		tion (		k all t	hat appl	_	Reportable compensation from	Reportable compensation from	Estimated amount of other
	per week	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
ART ALLEN										,
BOARD MEMBER	0	X						300.	0.	0.
TIM DUNN										
VICE PRESIDENT	0	<u> </u>		Х				750.	0.	0.
JIM KLINKER										
SECRETARY	40			X	L			149,921.	0.	26,575.
KEVIN ROGERS										
PRESIDENT	0			Х	<u> </u>			43,774.	0.	<u> </u>
DEWAYNE JUSTICE	1									
EXEC MEMBER	0	X						150.	0.	0.
ADAM HATLEY									_	_
BOARD MEMBER	0	X	<u> </u>		_			750.	0.	0.
STEVEN BALES										_
BOARD MEMBER	0	X					<u></u>	300.	0.	0.
MIKE GROSS										
BOARD MEMBER	0	X				ļ		900.	0.	0.
BROOKS CAMERON										_
BOARD MEMBER	0	X						750.	0.	0.
MARGUERITE TAN	1	l			l	l	l	i . i	_ [	_
BOARD MEMBER	0	X						900.	0.	0.
BOB_FLAKE					ĺ				_	_
BOARD MEMBER	0	X					L	600.	0.	<u> </u>
DONALD MERRELL										_
BOARD MEMBER	0	X	_					900.	0.	0.
LINDA MERRELL	1									_
BOARD MEMBER	0	X	<u> </u>		<u> </u>		L	900.	0.	0.
JIM GOLDMAN	4					ļ	i			_
BOARD MEMBER	0	X	_		<u> </u>		ऻ_	0.	0.	0.
MIKE NORRIS					ŀ					
BOARD MEMBER	0	X	_					600.	0.	0.
ALAN SEITZ										•
BOARD MEMBER	0	X	<b> </b>		<u> </u>		<b>!</b> —	900.	0.	0.
MARVIN MARLATT	1	,,						750	_	^
BOARD MEMBER	0	X			L	L		750.	0.	0.
BAA		٦	TEEA	0107L	L 04	1/24/09				Form <b>990</b> (2008)

, (A)	(B)	, , , , , ,						(D) (E)		(F)		
Name and Title	Average hours		tron (	_	,	_		Reportable compensation from	Reportable compensation from	Estimated amount of other		her
`	per week	or di	Instit	Officer	e	Highest employe	Former	the organization (W-2/1099-MISC)	related organizations (W 2/1099-MISC)	co	mpensation of the from the	
		Individual trustee or director	nstitutional trustee	ਕ	employee	est co	Jer 1	( 2)	( <u>-</u> ,	OI a	ganizatio ind relate	:d
		ารร	nal tr		oyee	compensated				or	ganızatıoı	٦S
		tee	ustee			ensa						
			"			ed						
GARY MORTIMER					$\vdash$							
BOARD MEMBER	0	Х						900.	0.			0.
MARK CLARIDGE												
BOARD MEMBER	0	X						600.	0.			0.
STEFANIE SMALLHOUSE												
BOARD MEMBER	0	X	ļ	ļ	ļ	L	ļ	600.	0.	<u> </u>		0.
PAUL VAN HOFWEGEN		١.,						750				^
BOARD MEMBER	0	X		<u> </u>	<del> </del>	-	_	750.	0.	-		0.
KELLY YOUNG	0	X						300.	0.			0.
BOARD MEMBER DR. EUGENE SANDER	-	<u>  ^</u>	-		-			300.		-		<del></del>
BOARD MEMBER	0	x						0.	0.			0.
JIM GRAHAM	۰	<del>  ^</del>	-	-	<del>                                     </del>			Ŭ.				<del></del>
BOARD MEMBER	0	X						600.	0.			0.
ROCK CRAMER												
EXEC MEMBER	0	Х						0.	0.			0.
SHERRY SAYLOR												
BOARD MEMBER	0	X	_	ļ	L.			0.	0.			0.
ANN PALMER									_			_
BOARD MEMBER	0	X	_				_	750.	0.	-		0.
PAUL PALMER	_	\ ,		\ <sub>V</sub>				750.	0.			0
VICE PRESIDENT	0	X	-	Х	├	$\vdash$		/50.	0.			0.
JOSEPH SIGG	0					X	1	117,767.	0.		19 (	007.
	<u> </u>			-	<del>                                     </del>	<del>  ^`</del>		11,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				<del>,,,,</del>
1 b Total	•						<b>•</b>	326,162.	0.		45,5	582.
2 Total number of individuals (including those in 1a) v	vho rec	eive	d m	ore i	thar	<b>\$1</b> (	00,0	00 in reportable c	ompensation from	the		
organization ► 2											.,	
										_	Yes	No
3 Did the organization list any former officer, director	or trust	ee, I	key	emp	oloy	ee, d	or hi	ghest compensate	ed employee	_	1	
on line 1a? If 'Yes,' compléte Schedule J for such ii									<b>.</b>	3	<del> </del>	<u> </u>
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater t	portable han \$15	e cor 50,00	mpe )0?	insa If 'Y	tion 'es'	and	ı otn ıplet	er compensation e Schedule J for s	such			
ındıvıdual										4	<u> </u>	<u> </u>
5 Did any person listed on line 1a receive or accrue of	ompens	atio	n fr	om a	any	unre	elate	ed organization for	services	_ ا	-	U
rendered to the organization? If 'Yes,' complete Sch	nedule .	tor	suc	n pe	erso	n				5		X
Section B. Independent Contractors  1 Complete this table for your five highest compensate	ed inde	pend	dent	cor	ntra	ctors	tha	it received more the	han \$100,000 of			
compensation from the organization								1	······			
(A)								(B)	),		(C)	
Name and business addres	<u>s</u>							Description of	of Services	Comp	ensatio	חנ
<del></del>												
								<del></del>				
	<del></del> -											
2 Total number of independent contractors (including	those ir	า 1)	who	rec	eive	ed m	nore	than \$100,000 in				
compensation from the organization > 0									į			

Par	t VIII   Statement of Revenue				
1		(A) Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
2,5	1a Federated campaigns 1a				
AN	b Membership dues 1b				
£ §	c Fundraising events 1c				
E A	d Related organizations 1 d				,
S,G	e Government grants (contributions) 1e 29,429.				
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	f All other contributions, gifts, grants, and similar amounts not included above 1f 39, 631.				
FÖ	g Noncash contribns included in Ins 1a-1f <sup>-</sup> \$				}
8₹	h Total. Add lines 1a-1f	69,060.			
1UE	Business Code				
Ē	2a MEMBERSHIP DUES & ASSESSMENTS	696,844.			696,844.
2	b STATE FUND	18,000.	18,000.		
Ş	c MISCELLANEOUS INCOME	5,390.			5,390.
SER	d STATE FUND - SERVICE FEES	267,825.		267,825.	
Α¥	e STATE FUND - SAFETY BONUS	347,380.	347,380.		
ag	f All other program service revenue				
Ã.	g Total. Add lines 2a-2f ▶	1,335,439.			
	3 Investment income (including dividends, interest and	02 002			02 002
	other similar amounts).	92,993.			92,993.
	4 Income from investment of tax-exempt bond proceeds.				
	5 Royalties (i) Real (ii) Personal				
	<b>6a</b> Gross Rents 84, 069.				;
	b Less: rental expenses 20, 606.				•
	c Rental income or (loss) 63, 463.				
	d Net rental income or (loss).	63,463.			63,463.
	(i) Securities (ii) Other	03,403.			03,403.
	7a Gross amount from sales of assets other than inventory 242, 183. 3, 500.				1
	b Less: cost or other basis and sales expenses 307, 080.				'
	c Gain or (loss) -64, 897. 3,500.				
	d Net gain or (loss)	-61,397.	-		-61,397.
JE	8a Gross income from fundraising events (not including \$				,
OTHER REVENUE	of contributions reported on line 1c).				:
RE	See Part IV, line 18				
Æ	<b>b</b> Less direct expenses <b>b</b>				
ò	c Net income or (loss) from fundraising events.		-		
	9a Gross income from gaming activities				
	See Part IV, line 19 a				
	b Less. direct expenses b				<b> </b>
	c Net income or (loss) from gaming activities				
	10a Gross sales of inventory, less returns and allowances a				
	b Less cost of goods sold b	-			
	c Net income or (loss) from sales of inventory.  Miscellaneous Revenue  Business Code			<del> </del>	
	11a ADVERTISING	70,574.		70,574.	
	b ROYALTIES	837,186.		,0,0,4.	837,186.
	6	33,,100.			33.,200.
	d All other revenue				
	e Total. Add lines 11a-11d	907,760.		<del></del>	
	12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c,	, , , ,			
	10c, and 11e.	2,407,318.	365,380.	338,399.	1,634,479.

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) but are not required to complete columns (B), (C), and (D).

Do 1 6b, .	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				1
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16.				
	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	234,970.			
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.			
7		628,247.			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	129,842.			
9	Other employee benefits	100,513.			-
10	Payroll taxes	33,982.			
11	Fees for services (non-employees)				
а	n Management				
b	Legal				
c	: Accounting	11,000.	·-		
c	<b>i</b> Lobbying				
e	Prof fundraising svcs See Part IV, In 17				
f	Investment management fees				
ç	<b>J</b> Other				
12	Advertising and promotion				
13	Office expenses	10,425.			
14	Information technology				
15	Royalties				
16	Occupancy	63,875.			
17		31,452.			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest		-		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	22,123.			
23	<u>.</u>	6,966.			
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below )				
	DIRECTORS FEES	144,130.			
	PRINTING AND PUBLICATIONS	105,667.			
	COMMITTEE EXPENSES	103,371.			
	OUTSIDE SERVICES	102,879.			
	AWARDS & PROMOTIONS	71,362.			<del></del>
	All other expenses	123,076.			
	Total functional expenses Add lines 1 through 24f	1,923,880.			
	Joint Costs. Check here  if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
$R\Delta\Delta$					Form 990 (2008)

					···	<del>,</del>					
		,			(A) Beginning of year		( <b>E</b> End o	<b>3)</b> f year	r		
	1	`Cash — non-interest-bearing .		·	257,191.	1		99.	752.		
	2	Savings and temporary cash investments .		ľ	5,102,159.	2			367.		
	3	Pledges and grants receivable, net		ľ		3					
	4	Accounts receivable, net		ľ	183,872.	4	1	74.4	430.		
	5	Receivables from current and former officers, director	s. trus	tees, kev emplovees.							
		or other related parties Complete Part II of Schedule	L	· · · ·		5					
	6	Receivables from other disqualified persons (as define			-			_			
٨		and persons described in section 4958(c)(3)(B) Comp	plete P	art II of Schedule L		6					
A S E T S	7	Notes and loans receivable, net				7					
Ĕ	8	Inventories for sale or use				8					
Ś	9	Prepaid expenses and deferred charges			15,257.	9		39,6	<u>514.</u>		
	10 a	Land, buildings, and equipment cost basis	10a	1,203,960.							
	b	Less accumulated depreciation Complete Part VI of									
		Schedule D	10Ь	131,845.	1,094,217.	10 c			<u>115.</u>		
	11	Investments — publicly-traded securities			230,632.	11	1	<u>76,1</u>	<u>110.</u>		
	12	Investments – other securities See Part IV, line 11				12					
	13	Investments - program-related. See Part IV, line 11				13					
	14	Intangible assets				14					
	15	Other assets. See Part IV, line 11			9,801.	15			163.		
	16	Total assets Add lines 1 through 15 (must equal line	34)		<u>6,893,129.</u>	16			)51.		
	17	Accounts payable and accrued expenses			313,779.	17	3:	<u> 17, 9</u>	<del>2</del> 27.		
	18	Grants payable		•		18	·				
	19	Deferred revenue			352,277.	19	3	61,3	<u> 331.</u>		
į	20	Tax-exempt bond liabilities				20					
Å	21	Escrow account liability Complete Part IV of Schedul		21							
LIABIL1T	22	Payables to current and former officers, directors, tru- highest compensated employees, and disqualified per	stees,	key employees,							
Ť		of Schedule L	SOLIS	Complete Part II		22	_	-			
E S	23	Secured mortgages and notes payable to unrelated the	urd on	rtion	<del></del>	23					
5	24	Unsecured notes and loans payable	iiiu pa	illez		24					
	25	Other liabilities. Complete Part X of Schedule D		, ,	<del> </del>	25					
	26	Total liabilities. Add lines 17 through 25		•	666,056.	26		79,2	258		
	20	Organizations that follow SFAS 117, check here	Y  an	nd complete lines	000,030.	20		13,2	200.		
P E		27 through 29 and lines 33 and 34.	[X] an	iu complete ililes							
	27	Unrestricted net assets			6,201,153.	27	6.6	17 7	325.		
ASSE	28	Temporarily restricted net assets		•	25,920.	28		29,4			
Š	29	Permanently restricted net assets		•	25,520.	29	•		100.		
Q R		Organizations that do not follow SFAS 117, check he	re Þ	and complete	· · · · · · · · · · · · · · · · · · ·		· · · · · ·				
		lines 30 through 34.		and complete							
たりるの	30	Capital stock or trust principal, or current funds				30			-		
	31	Paid-in or capital surplus, or land, building, and equip	ment t	fund		31					
<b>B414累り辿り</b>	32	Retained earnings, endowment, accumulated income,		ř		32					
Ñ	33	Total net assets or fund balances.	0, 0,,,	ici idilas	6,227,073.	33	6.6	76.7	793.		
Ĕ	34	Total liabilities and net assets/fund balances		-	6,893,129.	34		56, 0			
Pa	rt X				0,033,123.		.,,,,,	<del>50,</del> 0			
		i i i i i i i i i i i i i i i i i i i						Yes	No		
1	Acc	counting method used to prepare the Form 990.	ash	X Accrual	Other						
		ere the organization's financial statements compiled or					2a	х			
		ere the organization's financial statements audited by a		•			2b		Х		
c If 'Yes' to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,							<u> </u>				
	rev	new, or compilation of its financial statements and sele	ction c	of an independent accor	untant?		2c	X			
3	a As	a result of a federal award, was the organization requidit Act and OMB Circular A-133?	red to	undergo an audit or au	dits as set forth in the	Single			v		
							3a 3b		<u> </u>		
		res, did the organization undergo the required audit of	b If 'Yes,' did the organization undergo the required audit or audits?  BAA  Form 99								

#### **SCHEDULE C** (Form 990 or 990-EZ)

## **Political Campaign and Lobbying Activities**

OMB No 1545-0047 2008

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

► To be completed by organizations described below.

► Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

Department of the Treasury Internal Revenue Service If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

• Section 501(c)(3) organizations complete Parts I-A and B Do not complete Part I-C

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax), then

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

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

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

• 5	Section 501(c)(4), (5), or (6) o	rganizations: Complete Part III			
Name	of organization			Employer identifica	ation number
ARI	ZONA FARM BUREAU F	EDERATION		86-008688	
Par	To be completed See the instruction	<b>by all organizations exempt unde</b> ns for Schedule C for details.	section 501(c) a	nd section 527 org	janizations.
1	Provide a description of the	organization's direct and indirect political of	ampaign activities in	Part IV SEE PART	IV
2	Political expenditures		,	▶\$	
	Volunteer hours				
Par	To be completed See the instruction	<b>by all organizations exempt unde</b> ns for Schedule C for details.	r section 501(c)(3	).	
1	Enter the amount of any exc	ise tax incurred by the organization under	section 4955	▶\$	
2		ise tax incurred by organization managers		▶\$	
3	If the organization incurred a	a section 4955 tax, did it file Form 4720 for	this year?		Yes No
4 a	Was a correction made?				Yes No
	If 'Yes,' describe in Part IV				
Par	To be completed See the instructio	<b>by all organizations exempt unde</b> ns for Schedule C for details.	r section 501(c), e	except section 501	(c)(3).
1	Enter the amount directly ex	pended by the filing organization for section	n 527 exempt functio	n activities >\$	
2	Enter the amount of the filin function activities	g organization's funds contributed to other	organizations for sec	tion 527 exempt ►\$	
3	Total of direct and indirect e Form 1120-POL, line 17b	xempt function expenditures Add lines 1 a	and 2 and enter here	and on ►\$	
4	Did the filing organization file	e Form 1120-POL for this year?			Yes X No
5	made Enter the amount pair	and employer identification number (EIN) d and indicate if the amount was paid from directly delivered to a separate political orgular space is needed, provide information in	i the filing organizatio anization, such as a s	n's funds or were politi	cal contributions
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's own internal funds If none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter 0-
		<del></del>			<del>                                     </del>

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

Schedule C (Form 990 or 990-EZ) 2008

Schedule C (Form 990 or 990-EZ) 200	8 ARIZONA FARM	BUREAU FEDERAT	ION	86-008	6885 Page <b>2</b>
Part II-A To be complunder section	leted by organiza on 501(h)). See th	ntions exempt under the instructions for Sc	r section 501(c)(3) chedule C for deta	that filed Form 576	
<b>—</b>		gs to an affiliated group		-	
B Check ► If the filing	ng organization check	ked box A and 'limited co	ntrol' provisions apply	·	
(The term	Limits on Lobbying 'expenditures' mean	g Expenditures — s amounts paid or incur	red.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expendite	ures to influence pub	lic opinion (grass roots lo	bbying)		
<b>b</b> Total lobbying expenditi	ures to influence a le	gislative body (direct lobl	oying)		
c Total lobbying expendition	ures (add lines 1a an	d 1b)			
d Other exempt purpose of	•				
e Total exempt purpose e	xpenditures (add line	es 1c and 1d)			
f Lobbying nontaxable an both columns	nount. Enter the amo	ble in			
If the amount on line 1e, col	umn (a) or (b) is Ti	ne lobbying nontaxable a	mount is		,
Not over \$500,000	20	% of the amount on line 1e.			
Over \$500,000 but not over \$1,	,000,000 \$1	00,000 plus 15% of the excess of	over \$500,000		
Over \$1,000,000 but not over \$	\$1,500,000 \$1	75,000 plus 10% of the excess of	over \$1,000,000.		
Over \$1,500,000 but not over \$	\$17,000,000 \$2	25,000 plus 5% of the excess or	ver \$1,500,000		
Over \$17,000,000	\$1	,000,000			
<b>g</b> Grassroots nontaxable a	amount (enter 25% o	f line 1f)			
<b>h</b> Subtract line 1g from lin	ne 1a. Enter -0- if line	e g is more than line a			
i Subtract line 1f from lin	e 1c Enter -0- if line	f is more than line c			
j If there is an amount ot section 4911 tax for this	her than zero on eith s year?	er line 1h or line 1i, did t	he organization file Fo	orm 4720 reporting	Yes No
section 4911 tax for this	year? 4 e organizations that	er line 1h or line 1i, did t 	Jnder Section 501(h)	complete all of the five	Yes No
section 4911 tax for this	year? 4 e organizations that columns	Year Averaging Period Umade a section 501(h) el	Under Section 501(h) ection do not have to ons for lines 2a throu	complete all of the five gh 2f.)	Yes No
section 4911 tax for this	year? 4 e organizations that columns	Year Averaging Period I made a section 501(h) el below. See the instructi	Under Section 501(h) ection do not have to ons for lines 2a throu	complete all of the five gh 2f.)	Yes No  (e) Total
section 4911 tax for this (Som	year? 4 e organizations that columns Lobby	Year Averaging Period ( made a section 501(h) el below. See the instructi ing Expenditures During	Jnder Section 501(h) ection do not have to ons for lines 2a throu 4-Year Averaging Pe	complete all of the five gh 2f.) riod	
Calendar year (or fiscal year beginning in)  2a Lobbying non-taxable	year? 4 e organizations that columns Lobby	Year Averaging Period ( made a section 501(h) el below. See the instructi ing Expenditures During	Jnder Section 501(h) ection do not have to ons for lines 2a throu 4-Year Averaging Pe	complete all of the five gh 2f.) riod	
Calendar year (or fiscal year beginning in)  2a Lobbying non-taxable amount  b Lobbying ceiling amount (150% of line	year? 4 e organizations that columns Lobby	Year Averaging Period ( made a section 501(h) el below. See the instructi ing Expenditures During	Jnder Section 501(h) ection do not have to ons for lines 2a throu 4-Year Averaging Pe	complete all of the five gh 2f.) riod	
Calendar year (or fiscal year beginning in)  2a Lobbying non-taxable amount  b Lobbying ceiling amount (150% of line 2a, column (e))  c Total lobbying	year? 4 e organizations that columns Lobby	Year Averaging Period ( made a section 501(h) el below. See the instructi ing Expenditures During	Jnder Section 501(h) ection do not have to ons for lines 2a throu 4-Year Averaging Pe	complete all of the five gh 2f.) riod	
Calendar year (or fiscal year beginning in)  2a Lobbying non-taxable amount  b Lobbying ceiling amount (150% of line 2a, column (e))  c Total lobbying expenditures  d Grassroots non-taxable	year? 4 e organizations that columns Lobby	Year Averaging Period ( made a section 501(h) el below. See the instructi ing Expenditures During	Jnder Section 501(h) ection do not have to ons for lines 2a throu 4-Year Averaging Pe	complete all of the five gh 2f.) riod	

Schedule C (Form 990 or 990 EZ) 2008 ARIZONA FARM BUREAU FEDERATION 86-0086885 Page 3 To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768 (election under section 501(h)). See the instructions for Schedule C for details. (a) No Yes Amount During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? a Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means? i Other activities? If 'Yes.' describe in Part IV j Total lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If 'Yes,' enter the amount of any tax incurred under section 4912 c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section Part III-A **501(c)(6).** See the instructions for Schedule C for details. Yes No 1 Were substantially all (90% or more) dues received nondeductible by members? 2 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carryover lobbying and political expenditures from the prior year? To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered 'No' OR if Part III-A, question 3 is answered 'Yes.' See Schedule C Instructions for details. 1 Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a a Current vear 2b **b** Carryover from last year c Total 2c 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 5 Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4) Supplemental Information Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information ON SEPTEMBER 8TH, 2008 THE BOARD OF DIRECTORS VOTED TO ENDORSE THE FOLLOWING \_ CANDIDATES:

<u>SYDNEY HAY: CONGRESSIONAL CANDIDATE FOR ARIZONA CONGRESSIONAL DISTRICT 1 - </u>

<u> JOHN MCCAIN: PRESIDENTIAL CANDIDATE - CANDIDATE ID: S6AZ00019</u>

Schedule C (Form 990 or 990-EZ) 2008 ARIZONA FARM BUREAU FEDERATION	<u>86-00</u> 86885	Page 4
Part IV   Supplemental Information (continued)		
PART I-A, LINE 1 - DIRECT AND INDIRECT POLITICAL CAMPAIGN ACTIVITIES (C	ONTINUED)	
A LETTER WAS SENT TO EACH CANDIDATE TO ANNOUNCE THE ENDORSEMENT.	NO FURTHER ACT	<u>rion</u>
WAS TAKEN BY THE ARIZONA FARM BUREAU FEDERATION.		- <b></b>
POLITICAL EXPENDITURES: 0		
VOLUNTEER_HOURS:0		
	<b></b> <del>-</del>	
		<b></b>

#### SCHEDULE D (Form 990)

### **Supplemental Financial Statements**

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service Attach to Form 990. To be completed by organizations that answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

Name of the organization Employer Identification number ARIZONA FARM BUREAU FEDERATION 86-0086885 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year). Aggregate value at end of year Did the organization inform all donors and donor 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 may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit?? Part II | Conservation Easements Complete if the organization answered 'Yes' to Form 990, Part IV, Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Preservation of certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-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 Year 2<u>a</u> a Total number of conservation easements 2b **b** Total acreage restricted by conservation easements 2с c Number of conservation easements on a certified historic structure included in (a) 2d d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easement it holds? Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? Yes In Part XIV, 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 for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, 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) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X.

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

amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990. Part X

Schedule **D** (Form 990) 2008

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following

Schedule D (Form 990) 2008 ART ZC							86-008			Page 2
Part III Organizations Mainta	ining Colle	ctions	of Art, Histo	<u>orica</u>	l Treasures, o	r Other Si	<u>milar Ass</u>	ets (c	<u>ontınu</u>	ıed)
Using the organization's accession that apply):	on and other	records,	check any of th	ne foll	owing that are a s	ignificant us	e of its coll	ection it	ems (cl	heck all
a Teublic exhibition			<b>d</b> Loan	or exc	change programs					
<b>b</b> Scholarly research			e Other							
c Preservation for future gener	ations									
4 Provide a description of the orga Part XIV	nization's col	lections	and explain ho	w they	/ further the orgar	nization's exe	empt purpo	se in		
5 During the year, did the organiza assets to be sold to raise funds r	ition solicit or ather than to	receive be mair	donations of ar tained as part	rt, hist of the	orical treasures, organization's co	or other simi Nection?	lar	Yes		No
Part IV Trust, Escrow and Cu IV, line 9, or reported	stodial Ari an amount	rangen t on Fo	nents Compl rm 990, Par	ete r t X, I	f organization ine 21.	answered ————	'Yes' to F	Form 9	90, Pa 	art 
1a Is the organization an agent, trus included on Form 990, Part X?			-			ner assets no	ot	Yes		No
<b>b</b> If 'Yes,' explain the arrangement	in Part XIV a	and com	plete the follow	ing ta	ble:					
								Amount	t	
c Beginning balance						1 c				
d Additions during the year						1 d				
e Distributions during the year						1 e				
f Ending balance						11				
2a Did the organization include an a	mount on Fo	rm 990,	Part X, line 213	?				Yes		No
b If 'Yes,' explain the arrangement										
Part V Endowment Funds Co	mplete if o	rganıza	ation answer	ed 'Y	es' to Form 99	0, Part IV	', line 10.			
	(a) Current	year	(b) Prior yea	ır	(c) Two years bac	k (d) Thr	ee years back	(e) [	Four years	s back
1 a Beginning of year balance										
<b>b</b> Contributions										
c Investment earnings or losses										
d Grants or scholarships										-
e Other expenditures for facilities and programs										
f Administrative expenses										
<b>g</b> End of year balance.										
2 Provide the estimated percentag	e of the year	end bala	ance held as		<u></u>	•				
a Board designated or quasi-endov	-		*							
<b>b</b> Permanent endowment ►										
c Term endowment ▶	**************************************									
3a Are there endowment funds not		sion of t	he organization	that	are held and adm	inistered for	the	Г	Yes	No
organization by:  (i) unrelated organizations								3a(i)		
(ii) related organizations								3a(ii)	$\overline{}$	
<b>b</b> If 'Yes' to 3a(ii), are the related of	arganizations	listed of	rogurad on S	chodu	lo D2			3b	$\overline{}$	
4 Describe in Part XIV the intended	_		· · · · · · · · · · · · · · · · · · ·							
Part VI Investments—Land, B						line 10				
Description of investment		(a) Cost	t or other basis vestment)	(b)	Cost or other pasis (other)	(c) Depre	eciation	(d) E	Book Va	alue
1a Land		<del> </del>		<u> </u>	1,009,114.			1	,009	,114.
<b>b</b> Buildings		<b></b>			=, ,				<u>, 1</u>	
c Leasehold improvements		<u> </u>								
d Equipment		<b></b>	·-·		147,896.		97,847.		50	,049.
e Other		<del></del>			46,950.		33,998.	-		, 952.
Total. Add lines 1a-1e (Column (d) she	ould equal Fo	rm 990	Part X column	(R)			,,,,,,,,	1		,115.
Total Aud lines Tarte (Column (a) She	ouiu equai ru	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	r art A, Column	, ,,,,,,	10(0)				1012	<u>, 110.</u>

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Schedule **D** (Form 990) 2008

Schedule D (Form 990) 2008 ARIZONA FARM BURE	AU FEDERATION	86-0	086885 Page <b>3</b>
Part VII Investments-Other Securities See Fo	orm 990, Part X, lin	e 12. N/A	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of val Cost or end-of-year m	uation arket value
Financial derivatives and other financial products			<del></del>
Closely-held equity interests			
Other			
			<del></del>
	<del></del>		<u> </u>
			<del></del>
	· · · · · · · · · · · · · · · · · · ·		·
		<del></del>	
		· · · · · · · · · · · · · · · · · · ·	
	-1-11-11		
Total. (Column (b) should equal Form 990 Part X, col (B) line 12)			
Part VIII Investments—Program Related (See F	orm 990, Part X, II	ne 13) N/A	
(a) Description of investment type	(b) Book value	(c) Method of val	uation
		Cost or end-of-year m	arket value
-		****	
-	<del>, ,,</del> .		
			·
Total. Column (b)(should equal Form 990, Part X, Col (B) line 13)  Part IX Other Assets (See Form 990, Part X,	l 15\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
<u> </u>	line 15) N/A scription		(h) Dealeratus
(a) De	scription		(b) Book value
		<del></del>	
***************************************		······································	
	<del></del>		
	<del></del>		
Total. Column (b) Total (should equal Form 990, Part X, col	L/P1 line 151		
Part X Other Liabilities (See Form 990, Part X			
(a) Description of Liability	(b) Amount		
Federal Income Taxes	(2) , 11100111		
		$\dashv$	
	_	$\dashv$	
<del></del>		_	
	_ <del> </del>	_	
Total. Column (b) Total (should equal Form 990, Part X, col (B) line 25)	<b>&gt;</b>	$\dashv$	
In Part XIV, provide the text of the footnote to the organizal		its that reports the organization's list	oulty for uncortain tax
noestions under EIN 49	manciai stateillei	no mai reporto trie organization s lial	omy for uncertain tax

Schedule	ED (Form 990) 2008 ARIZONA FARM BUREAU FEDERATION	36-008	<u> 36885                                    </u>	Page 4
Part X	Reconciliation of Change in Net Assets from Form 990 to Financial Statements		N/A	
<b>1</b> Tot	al revenue (Form 990, Part VIII,column (A), line 12)			
<b>2</b> Tot	al expenses (Form 990, Part IX, column (A), line 25)			
3 Ex	cess or (deficit) for the year Subtract line 2 from line 1			
<b>4</b> Ne	t unrealized gains (losses) on investments .	•		
<b>5</b> Do	nated services and use of facilities			
6 Inv	estment expenses .			
<b>7</b> Pri	or period adjustments	i		
8 Oth	ner (Describe in Part XIV)			
<b>9</b> Tot	al adjustments (net) Add lines 4-8			
	cess or (deficit) for the year per financial statements. Combine lines 3 and 9			
	Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return	N/A	
<b>1</b> Tot	al revenue, gains, and other support per audited financial statements	1_		
<b>2</b> Am	ounts included on line 1 but not on Form 990, Part VIII, line 12			
a Ne	t unrealized gains on investments	_		
<b>b</b> Do	nated services and use of facilities . 2b	_		
c Re	coveries of prior year grants . 2c	_		
<b>d</b> Oth	ner (Describe in Part XIV)	_		
e Ad	d lines 2a through 2d	2e		
	otract line 2e from line 1	3		
<b>4</b> Am	ounts included on Form 990, Part VIII, line 12, but not on line 1:			
a Inv	estments expenses not included on Form 990, Part VIII, line 7b			
<b>b</b> Oth	ner (Describe in Part XIV)	_		
<b>c</b> Ad	d lines 4a and 4b.	4c		
	al revenue Add lines <b>3</b> and <b>4c</b> . (This should equal Form 990, Part I, line 12)	5	<u> </u>	
Part X	III Reconciliation of Expenses per Audited Financial Statements With Expenses per	<u>∍r Retı</u>	ırn N/A	<del></del>
<b>1</b> Tot	al expenses and losses per audited financial statements	1		
<b>2</b> Am	ounts included on line 1 but not on Form 990, Part IX, line 25			
<b>a</b> Do	nated services and use of facilities 2a			
<b>b</b> Pri	or year adjustments . <b>2b</b>			
<b>c</b> Los	ses reported on Form 990, Part IX, line 25			
<b>d</b> Oth	ner (Describe in Part XIV)			
e Ad	d lines 2a through 2d	2e		
<b>3</b> Su	otract line 2e from line 1	3		
<b>4</b> Am	ounts included on Form 990, Part IX, line 25, but not on line 1:	ļ	ĺ	
a Inv	estments expenses not included on Form 990, Part VIII, line 7b			
<b>b</b> Oth	ner (Describe in Part XIV)			
c Ad	d lines 4a and 4b.	4 c		
	al expenses Add lines 3 and 4c (This should equal Form 990, Part I, line 18).	5		
Part X	V   Supplemental Information			
Complete line 4 P	e this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part art X, Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b	V, lines	1b and 2b, Pa	art V,
<b></b> -				

Schedule D	(Form 990) 2008  Supplemental Information (continued)	Page <b>5</b>
Part XIV	Supplemental Information (continued)	
	•	
		. <b></b> -
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# SCHEDULE J (Form 990)

## **Compensation Information**

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

Attach to Form 990. To be completed by organizations that answered 'Yes' to Form 990, Part IV, line 23.

OMB No. 1545-0047 2008

Open to Public Inspection

ARIZONA FARM BUREAU FEDERATION

Department of the Treasury Internal Revenue Service

Employer Identification number 86-0086885

Par	t I Questions Regarding Compensation			
			Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence	1		,
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			'
ь	If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain	1 <u>ь</u>	-	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
				!
3	Indicate which, if any, of the following organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations  Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a			,
a	Receive a severance payment or change of control payment?	4a		X
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	<u> </u>	Х
	If 'Yes' to any of 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
a	The organization?	5a		<u> </u>
t	Any related organization?	5 b		<u> </u>
	If 'Yes' to line 5a or 5b, describe in Part III.			- { 1
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
a	The organization?	6a		
t	Any related organization?	6ь	ļ	<u> </u>
	If 'Yes' to line 6a or 6b, describe in Part III	-		!
7	For person listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If 'Yes,' describe in Part III	7		
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If 'Yes,' describe in Part III	8		

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

Schedule J (Form 990) 2008

#### SCHEDULE O (Form 990)

### Supplemental Information to Form 990

OMB No 1545-0047

2000

Open to Public Inspection

Employer identification number

86-0086885

Department of the Treasury Internal Revenue Service

ARIZONA FARM BUREAU FEDERATION

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

<u>FORM 990, PART VI, LINE 6 - EXPLANATION OF CLASSES OF MEMBERS OR SHAREHOLDER</u> WE HAVE 2 TYPES OF MEMBERS, AGRICULTURAL MEMBERS (AG) WHICH ARE DEFINED AS PERSONS INVOLVED WITH PRODUCTION AGRICULTURE AND ASSOCIATE MEMBERS (NA) WHICH ARE PEOPLE WHO ARE NOT DIRECTLY INVOLVED IN PRODUCTION AGRICULTURE. FORM 990, PART VI, LINE 7A - HOW MEMBERS OR SHAREHOLDERS ELECT GOVERNING BODY THE BOARD IS MADE UP OF 4 OFFICERS, 2 COMMITTEE CHAIRS AND DIRECTORS, ALL OF WHOM MUST BE CURRENT AG MEMBERS. THREE OFFICERS, THE PRESIDENT, VICE PRESIDENT AND SECOND VICE PRESIDENT ARE ELECTED FOR 2 YEAR TERMS BY THE DELEGATE BODY (AS DESCRIBED BELOW). THE LAST OFFICER SEAT, THE SECRETARY, IS ALWAYS THE CHIEF EXECUTIVE OFFICER AS DICTATED BY THE BYLAWS. THE TWO COMMITTEE SEATS CONSIST OF ONE SEAT FOR THE CHAIR OF THE YOUNG FARMERS AND RANCHERS COMMITTEE (YFR) AND ONE SEAT FOR THE CHAIR OF THE WOMEN'S LEADERSHIP COMMITTEE (WLC). THE WLC CHAIR IS ELECTED FOR 2 YEAR TERMS BY THE DELEGATE BODY (AS DESCRIBED BELOW). THE YFR CHAIR IS APPOINTED ANNUALLY BY THE BOARD OF DIRECTORS. THE REMAINING DIRECTORS ARE MADE UP OF REPRESENTATIVES FROM EACH OF THE 13 COUNTY FARM BUREAUS. THE NUMBER OF THE REMAINING DIRECTOR SEATS IS DETERMINED BY THE NUMBER OF AG MEMBERS IN EACH COUNTY. EACH COUNTY WILL HAVE A MINIMUM OF 1 SEAT AND A MAXIMUM OF 4 SEATS. ANNUALLY, THE 13 COUNTY FARM BUREAUS NOMINATE INDIVIDUALS TO SERVE ON THE STATE BOARD. EACH COUNTY FARM BUREAU THEN ELECTS DELEGATES TO THE STATE ANNUAL MEETING; THE NUMBER OF DELEGATES IS ALSO BASED ON THE NUMBER OF AG MEMBERSHIPS IN THEIR RESPECTIVE COUNTIES. AT THE AZFB ANNUAL MEETING EACH NOVEMBER, THE DELEGATES RATIFY ALL OF THE NOMINATIONS MADE BY THE COUNTY FARM BUREAUS, ELECT THE OFFICERS AS NOTED ABOVE, ELECT THE WLC CHAIR AS NOTED ABOVE, AND SEATS THE STATE BOARD OF DIRECTORS.

Schedule <b>O</b> (Form 990) 2008	Page <b>2</b>
Name of the organization	Employer identification number
ARIZONA FARM BUREAU FEDERATION	86-0086885
FORM 990, PART VI, LINE 7A - HOW MEMBERS OR SHAREHOLDERS ELEC	T GOVERNING BODY (CONTINUED)
NON-VOTING, EX-OFFICIO MEMBERS CAN BE APPOINTED BY THE PR	RESIDENT OR SEATED BY THE
DELEGATE BODY TO ADVISE THE BOARD ON ISSUES ROUTINELY DIS	CUSSED BY THE BOARD.
FORM 990, PART VI, LINE 10 - FORM 990 REVIEW PROCESS	
ELLEN MIRALDI, THE AZFB'S OUTSIDE ACCOUNTANT REVIEWS THE	FORM 990 WITH JIM KLINKER,
THE AZFB CAO. THEY HIT THE HIGHLIGHTS WITH THE EXECUTIVE	COMMITTEE AND THE
EXECUTIVE COMMITTEE APPROVES TAX RETURN FOR FILING.	
FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENF	ORCEMENT OF C
EACH YEAR AT THE NOVEMBER BOARD MEETING THE BOARD OF DIRE	CTORS REVIEWS AND DISCUSSES
THE POLICY. ALL BOARD MEMBERS AT THAT TIME SIGN A STATEM	ENT THAT THEY HAVE READ THE
POLICY AND HAVE NO CONFLICT, OR THEY MUST DETAIL ANY CONF	LICT THEY HAVE.
FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PR	ROCESS FOR OFFICERS & KEY EMPLOYEE
A SALARY COMMITTEE REVIEWS STAFF SALARIES ANNUALLY. THE	COMMITTEE IS MADE UP OF
BOARD OFFICERS. ALSO, A BUDGET COMMITTEE REVIEWS THE BOA	RD PER DIEMS ANNUALLY AND
ANY CHANGES MUST BE APPROVED BY THE EXECUTIVE COMMITTEE.	
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBL	ICLY AVAILABLE
DOCUMENTS ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE AT	AZFB.ORG

Schedule J (Form 990) 2008 ARIZONA FARM BUREAU FEDERATION

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed

Page.2

86-0086885

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

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

		(B) Breakdown o	(B) Breakdown of W-2 and/or 1099-MISC	MISC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name	[	(i) Base compensation	(ii) Bonus and incentive compensation	(III) Other compensation	comp	benefits	(B)(I)·(D)	reported in prior Form 990 or Form 990-EZ
JIM KLINKER	Θ	117,881.	10,536.	21,504.	26, 575.	0.	176, 496.	0:
	(ii)	0.	0.			0		
	<u> </u>	             	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	           		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1 1 1 1 1 1 1 1
	<b></b>							
	Θ	1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1			1 1 1 1 1 1	1 1 1 1 1 1
	<b>(E)</b>							
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# SCHEDULE D, PART XIV - SUPPLEMENTAL INFORMATION PAGE 6

#### ARIZONA FARM BUREAU FEDERATION

86-0086885

# SCHEDULE D, PART XI, LINE 8 OTHER CHANGES IN NET ASSETS OR FUND BALANCES

FEDERAL INCOME TAX PROVISION

TOTAL  $\frac{\$}{\$}$  -7,396.

# SCHEDULE D, PART XII, LINE 4B OTHER REVENUE INCLUDED ON FORM 990 BUT NOT INCLUDED IN F/S

RENTAL EXPENSES

TOTAL \$ -20,606.

# SCHEDULE D, PART XIII, LINE 2D OTHER EXPENSES AND LOSSES PER AUDITED F/S

RENTAL EXPENSES TAX PROVISION

\$ 20,606. 7,396. TOTAL \$ 28,002.

Application for Extension of Time To File an **Exempt Organization Return** 

OMB No 1545-1709 (Rev April 2009 Department of the Treasury Internal Revenue Service File a separate application for each return. If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box . . . . If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only . . . All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Charities & Nonprofits Name of Exempt Organization Employer identification number Type or print ARIZONA FARM BUREAU FEDERATION 86-0086885 File by the due date for Number, street, and room or suite number. If a P.O. box, see instructions filing your return See 325 SOUTH HIGLEY ROAD #210 City, town or post office, state, and ZIP code. For a foreign address, see instructions instructions GILBERT, AZ 85296 Check type of return to be filed (file a separate application for each return). |X| Form 990 Form 4720 Form 990-T (corporation) Form 990-T (section 401(a) or 408(a) trust) Form 5227 Form 990-BL Form 6069 Form 990-EZ Form 990-T (trust other than above) Form 990-PF Form 8870 Form 1041-A • The books are in the care of ► ARIZONA FARM BUREAU FEDERATION Telephone No. ► (480) 635-3600 FAX No. ► If the organization does not have an office or place of business in the United States, check this box .... check this box. If it is for part of the group, check this-box of all and attach a list with the names and EINs of all members the extension will cover. 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 5/15 \_\_\_ , 20 10 \_, to file the exempt organization-return for the organization named above. The extension is for the organization's return to GDEN, UT calendar year 20 \_ \_ or X tax year beginning 10/01 \_\_\_\_\_, 20\_\_08\_\_, and ending \_\_\_9/30\_\_\_\_\_, 20\_\_09\_\_. Final return Change in accounting period 2 If this tax year is for less than 12 months, check reason: Initial return 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 3a \$ 0. nonrefundable credits. See instructions b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments 0. 3Ы\$ made Include any prior year overpayment allowed as a credit c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). 0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 4-2009)

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