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Form **990-EZ**

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 black lung benefit trust or private foundation)

▶ 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 $500,000 and total assets less than $1,250,000 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*

OMB No 1545-1150

2009

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning 1/1/2009 , and ending 12/31/2009

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization Indiana Farm Bureau
Putnam County Farm Bureau, Inc

Number and street (or P O box, if mail is not delivered to street address) Room/suite
1001 N. Jackson Street

City, town, or country State ZIP + 4
Greencastle IN 46135

D Employer identification number
35-0886084

E Telephone number
(317) 692-7851

F Group Exemption Number . ▶ 0963

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

G Accounting Method ☒ Cash ☐ Accrual Other (specify) ▶

H Check ▶ ☒ if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

I **Website:** ▶ n/a

J **Tax-exempt status** (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 Form 990-EZ or Form 990 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 $500,000 or more, file Form 990 instead of Form 990-EZ ▶ $ 51,137

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

Revenue	1	Contributions, gifts, grants, and similar amounts received		1	201
	2	Program service revenue including government fees and contracts		2	2,946
	3	Membership dues and assessments		3	14,921
	4	Investment income		4	33,069
	5a	Gross amount from sale of assets other than inventory	5a 0		
	b	Less cost or other basis and sales expenses	5b 0		
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)		5c	0
	6	Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here ▶ ☐			
	a	Gross revenue (not including $ 0 of contributions reported on line 1)	6a 0		
	b	Less direct expenses other than fundraising expenses	6b 0		
	c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)		6c	0
	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	0
	8	Other revenue (describe ▶)		8	0
	9	**Total revenue.** Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 ▶		9	51,137
Expenses	10	Grants and similar amounts paid (attach schedule)		10	2,910
	11	Benefits paid to or for members		11	
	12	Salaries, other compensation, and employee benefits		12	5,156
	13	Professional fees and other payments to independent contractors		13	894
	14	Occupancy, rent, utilities, and maintenance		14	8,088
	15	Printing, publications, postage, and shipping		15	0
	16	Other expenses (describe ▶ See Attached Statement)		16	35,887
	17	**Total expenses.** Add lines 10 through 16 ▶		17	52,935
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)		18	-1,798
	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	118,989
	20	Other changes in net assets or fund balances (attach explanation)		20	0
	21	Net assets or fund balances at end of year Combine lines 18 through 20 ▶		21	117,191

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Part II Balance Sheets. If Total assets on line 25, column (B) are $1,250,000 or more, file Form 990 instead of Form 990-EZ

(See the instructions for Part II)	(A) Beginning of year		(B) End of year
22 Cash, savings, and investments	34,099	22	34,741
23 Land and buildings	117,777	23	113,580
24 Other assets (describe ▶ See Attached Statement)	256	24	1,464
25 **Total assets**	152,132	25	149,785
26 **Total liabilities** (describe ▶ See Attached Statement)	33,143	26	32,594
27 **Net assets or fund balances** (line 27 of column (B) **must** agree with line 21)	118,989	27	117,191

Part III Statement of Program Service Accomplishments (See the instructions for Part III.)

What is the organization's primary exempt purpose? See statement 1 attached.

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

		Expenses (Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)	
28	see statement 2		
	(Grants $ 0) If this amount includes foreign grants, check here ▶ ☐	28a	0
29			
	(Grants $ 0) If this amount includes foreign grants, check here ▶ ☐	29a	0
30			
	(Grants $ 0) If this amount includes foreign grants, check here ▶ ☐	30a	0
31	Other program services (attach schedule)		
	(Grants $ 0) If this amount includes foreign grants, check here ▶ ☐	31a	0
32	**Total program service expenses.** (add lines 28a through 31a) ▶	32	0

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated (See the instructions for Part IV)

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Mann, Christopher 1001 North Jackson Street Greencastle IN 46135-100	Title President Hr/WK 5 00	915	0	0
Cash, Steve 1001 North Jackson Street Greencastle IN 46135-100	Title Vice President Hr/WK 4 00	650	0	0
Cash, Patti 1001 North Jackson Street Greencastle IN 46135-100	Title Secretary Hr/WK 4 00	415	0	0
Greenburg, David 1001 North Jackson Street Greencastle IN 46135-100	Title Treasurer Hr/WK 4 00	570	0	0
Evans, Elizabeth 1001 North Jackson Street Greencastle IN 46135-100	Title Women's Leader Hr/WK 4 00	650	0	0
Allee, Judith 1001 North Jackson Street Greencastle IN 46135-100	Title Director Hr/WK 1 00	275	0	0
Ames, Bradly 1001 North Jackson Street Greencastle IN 46135-100	Title Director Hr/WK 1 00	0	0	0
Ames, Kim 1001 North Jackson Street Greencastle IN 46135-100	Title Director Hr/WK 1 00	105	0	0
Arnold, Loretta 1001 North Jackson Street Greencastle IN 46135-100	Title Director Hr/WK 1 00	0	0	0
Arnold, Virgil 1001 North Jackson Street Greencastle IN 46135-100	Title Director Hr/WK 1.00	350	0	0
Berry, Brian 1001 North Jackson Street Greencastle IN 46135-100	Title Director Hr/WK 1 00	90	0	0
Fordice, Dennis 1001 North Jackson Street Greencastle IN 46135-100	Title Director Hr/WK 1 00	60	0	0
Gough, Byron 1001 North Jackson Street Greencastle IN 46135-100	Title Director Hr/WK 1 00	90	0	0
Hacker, Gyspy 1001 North Jackson Street Greencastle IN 46135-100	Title Director Hr/WK 1 00	0	0	0
Hacker, Myron 1001 North Jackson Street Greencastle IN 46135-100	Title Director Hr/WK 1 00	120	0	0
Legan, Mark 1001 North Jackson Street Greencastle IN 46135-100	Title Director Hr/WK 1 00	135	0	0
Mann, Jennifer 1001 North Jackson Street Greencastle IN 46135-100	Title Director Hr/WK 1 00	0	0	0
Mann, Joseph 1001 North Jackson Street Greencastle IN 46135-100	Title Director Hr/WK 1 00	135	0	0

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

			Yes	No
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? 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 why the organization did not report the income on Form 990-T.			
a	Did the organization have unrelated business gross income of $1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a	X	
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	35b	X	
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		X
37 a	Enter amount of political expenditures, direct or indirect, as described in the instructions ► 37a 0			
b	Did the organization file **Form 1120-POL** for this year?	37b		
38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee **or** were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b 0			
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			
40 a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ► 0 , section 4912 ► 0 , section 4955 ► 0			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b	n/a	
c	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ►			
d	Section 501(c)(3) and 501(c)(4) organizations 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	40e		X
41	List the states with which a copy of this return is filed ► INDIANA			
42 a	The organization's books are in care of ► Indiana Farm Bureau Telephone no. ► (317) 692-7851			
	Located at ► 225 S East Street City Indianapolis ST IN ZIP + 4 ► 46202			
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)?	42b		X
	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.**			
c	At any time during the calendar year, did the organization maintain an office outside of the U S.?	42c		X
	If "Yes," enter the name of the foreign country ►			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041**—Check here ► ☐ and enter the amount of tax-exempt interest received or accrued during the tax year ► 43 N/A			

			Yes	No
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 and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46–49b and complete the tables for lines 50 and 51. **Not applicable**

			Yes	No
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.	46	n/a	
47	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II.	47	n/a	
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	n/a	
49 a	Did the organization make any transfers to an exempt non-charitable related organization?	49a	n/a	
b	If "Yes," was the related organization a section 527 organization?	49b	n/a	

50 Complete this table for the organization's 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 "

(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
Name None Str City ST ZIP	Title Hr/WK 00	0	0	0
Name Str City ST ZIP	Title Hr/WK 00	0	0	0
Name Str City ST ZIP	Title Hr/WK 00	0	0	0
Name Str City ST ZIP	Title Hr/WK .00	0	0	0
Name Str City ST ZIP	Title Hr/WK .00	0	0	0

f Total number of other employees paid over $100,000 . ▶

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

(a) Name and address of each independent contractor paid more than $100,000	(b) Type of service	(c) Compensation
Name None Str City ST ZIP		
Name Str City ST ZIP		
Name Str City ST ZIP		
Name Str City ST ZIP		
Name Str City ST ZIP		

d 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

▶ David Greenburg — Signature of officer — Date 8-2-10

▶ David Greenburg, Treasurer — Type or print name and title

Paid Preparer's Use Only

Preparer's signature	Date	Check if self-employed ▶ ☐	Preparer's identifying number (See instructions)
	7/27/2010		

Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ Indiana Farm Bureau Inc, P O Box 1290, Indianapolis, IN 46206

EIN ▶

Phone no ▶ (317) 692-7851

May the IRS discuss this return with the preparer shown above? See instructions . ▶ ☒ Yes ☐ No

Part IV (990-EZ) - List of Officers, Directors, Trustees, and Key Employees

Name and address	Title and average hours per week devoted to position	Compensation	Contributions to emp benefit plans & deferred compensation	Expense account and other allowances
McCammack, Clayton 1001 North Jackson Street Greencastle IN 46135-1004	Title Director Hr/WK 1.00	0	0	0
Poynter, Ray 1001 North Jackson Street Greencastle IN 46135-1004	Title Director Hr/WK 1.00	135	0	0
Rowings, David 1001 North Jackson Street Greencastle IN 46135-1004	Title Director Hr/WK 1.00	60	0	0
Summers, Eugene 1001 North Jackson Street Greencastle IN 46135-1004	Title Director Hr/WK 1.00	90	0	0
Sutherlin, Ron 1001 North Jackson Street Greencastle IN 46135-1004	Title Director Hr/WK 1.00	120	0	0
	Title Hr/WK .00	0	0	0
	Title Hr/WK .00	0	0	0
	Title Hr/WK 00	0	0	0
	Title Hr/WK 00	0	0	0
	Title Hr/WK 00	0	0	0
	Title Hr/WK 00	0	0	0
	Title Hr/WK 00	0	0	0
	Title Hr/WK 00	0	0	0
	Title Hr/WK 00	0	0	0
	Title Hr/WK 00	0	0	0
	Title Hr/WK 00	0	0	0
	Title Hr/WK 00	0	0	0

Explanations (990-EZ)

Reasonable Cause

1
2
3
4
5
6
7
8
9
10

General Explanation

	Part	Line	Explanation
1	III		Represent the farmer's voice on issues related to agriculture, educate the consumer and promote
2			farm products, keep members abreast of policies and new developments.
3			
4			
5			
6			
7			
8			
9			
10			

Part I, Line 16 (990-EZ) - Other Expenses

			35,887
1	Travel	1	183
2	Meals and entertainment	2	0
3	Fundraising	3	
4	Amortization	4	0
5	Conferences, conventions, and meetings	5	1,962
6	Depreciation	6	622
7	Depletion	7	
8	Equipment rental and maintenance	8	
9	Interest	9	
10	Supplies	10	
11	Telephone	11	
12	Unrelated business income taxes	12	563
13	Membership services	13	65
14	Ag Promotion	14	6,006
15	District Dues	15	297
16	Miscellaneous Expenses	16	792
17	Building Expens for leased space	17	25,031
18	Unrelated Business Income Taxes, State	18	366
19	Political Contributions	19	0
20		20	
21		21	
22		22	
23		23	
24		24	
25		25	
26		26	
27		27	
28		28	

Part II, Line 24 (990-EZ) - Other Assets

256 1,464

	Description	Beginning	End
1	Accounts Receivable	0	0
2	Prepaid Expenses	0	0
3	Equipment, net of accumulated depreciation	256	1,464
4			
5			
6			
7			
8			
9			
10			

Part II, Line 26 (990-EZ) - Liabilities

		33,143	32,594
	Description	Beginning	End
1	Accounts Payable	0	0
2	Accrued Expenses	0	0
3	Payroll Tax Liability	0	0
4	Unearned Income	0	0
5	Mortgage Payable	33,143	32,594
6	Note Payable	0	0
7			
8			
9			
10			

Form 990-EZ, Page 2, Part III - Organization's Program Achievement or Accomplishments

importance of agriculture and put a human face on agriculture through various Ag Week activities. The Putnam County Farm Bureau participated in the Ag Breakfast and provided sponsorship for awards, the third grade ag field trip, the Rotary-Kiwanis lunch, and the mini-farm fest.

The Ag Breakfast served 450 community members, the Rotary-Kiwanis luncheon 65, the third grade ag field trip 580, and mini-farm fest 690. A total of 1,785 people received some form of agricultural education during these events.

32 volunteers contributed a total of 220 volunteer hours in coordinating and carrying out these activities.

Putnam County Farm Bureau contributed $1,453 for the promotions, publications, supplies, and volunteer expenses.

Total contributed to achievement #1 $1,453

Line 29 - Putnam County Farm Bureau, Inc. helps keep membership of the organization aware of issues facing agriculture and in communication with elected officials that may be able to help with those issues. A membership newsletter is sent out to voting members three times each year. Meeting are held for members where they can meet with legislators, get commodity updates, meet with candidates for elected positions, and have discussions with school superintendents.

15 volunteers contributed a total of 62 volunteer hours in coordinating and carrying out these activities. Over 165 members of the organization attended these meetings.

Putnam County Farm Bureau, Inc. contributed $1,552 for supplies, refreshments, and publications.

Total contributed to achievement #2 $1,552

Line 30 - Putnam County Farm Bureau, Inc supports community youth with an interest in agriculture. Monetary support is given to the local 4-H program during the county fair, the local schools, and the local FFA program. Scholarships are also given to members' children who are pursuing post-secondary education 240 youth were able to attend Farm Bureau county fair activities such as the pedal tractor pull, pet & hobby show, and animal ultrasound. 35 FFA youth were able to attend Farm Bureau activities.

14 volunteers contributed a total of 21 volunteer hours in coordinating and carrying out these activities.

Putnam County Farm Bureau, Inc. contributed $1,093 for activities at the county fair, $600 for scholarships, and $250 to sponsor FFA activities.

Total contributed to achievement #3 $1,943

ASSET DEPRECIATION SHORT REPORT
PUTNAM COUNTY FARM BUREAU Dec. 31, 2009

Sorted ASSET A/C#
Method 1-FEDERAL-Std Conv Applied

Range 1600 - 1610
Include All assets

Date Acq	Description	Meth/Life	Cost	Section 179	Depr Basis	Includes Section 179 Beg A/Depr	Curr Depr	End A/Depr
ASSET A/C#: 1600 - BUILDING								
07/01/65	Building 1965-07	SLP/50 000	44,949 06	0 00	44,949 06	29,709 06	899 00	30,608 06
12/17/91	Handicap ramps and rails 1991-12	MSL/20 000	4,000 00	0 00	4,000 00	3,408 00	200 00	3,608 00
05/26/92	Windows and exterior trim repaired 1992-05	MSL/10 000	1,583 57	0 00	1,583 57	1,583 57	0 00	1,583 57
03/11/96	Air condition and ductwork repairs 1996-03	MSL/ 5 000	3,488 00	0 00	3,488 00	3,488 00	0 00	3,488 00
03/15/96	Carpet and Vinyl base 1996-03	MSL/ 5 000	2,446 63	0 00	2,446 63	2,446 63	0 00	2,446 63
03/31/96	Cabinets and shelves 1996-03	MSL/10 000	1,290 00	0 00	1,290 00	1,290 00	0 00	1,290 00
08/29/01	Roof replacement 2001-08	MSL/20 000	3,242 73	0 00	3,242 73	2,811 73	162 00	2,973 73
04/01/02	Building addition 2002-04	MACRS/39 000	95,885 55	0 00	95,885 55	16,566 55	2,459 00	19,025 55
06/30/03	Parking lot paved 2003-06	MSL/15 000	7,148 00	0 00	7,148 00	2,623 00	477 00	3,100 00
Grand totals	1600 - BUILDING (9 assets)		164,033 54	0 00	164,033 54	63,926 54	4,197 00	68,123 54
ASSET A/C#: 1610 - FURNITURE AND EQUIPMENT								
07/01/65	Chairs, 80 ea "Adirondack" 1965-07	MA200/ 7 000	334 87	0 00	334 87	334 87	0 00	334 87
07/01/65	Tables, 4 ea "Adirondack" 1965-07	MA200/ 7 000	116 46	0 00	116 46	116 46	0 00	116 46
07/01/65	Tables, 2 ea "Kruger" 1965-07	MA200/ 7 000	119 08	0 00	119 08	119 08	0 00	119 08
07/01/83	Coat rack 1983-07	MA200/ 7 000	99 95	0 00	99 95	99 95	0 00	99 95
12/11/87	Cabinet 1987-12	MA200/ 7 000	516 48	0 00	516 48	516 48	0 00	516 48
05/08/90	Television, Sharp 19" color 1990-05	MA200/ 7 000	124 99	0 00	124 99	124 99	0 00	124 99
05/08/90	VCR, Symphonic 1990-05	MA200/ 7 000	124 99	0 00	124 99	124 99	0 00	124 99
01/31/96	Microwave oven, Emerson MW8675W 1996-01	MA200/ 7 000	102 89	0 00	102 89	102 89	0 00	102 89
07/21/99	Monitor, IBM 15" SVGA color 1999-07	MSL/ 5 000	249 00	0 00	249 00	249 00	0 00	249 00
12/31/01	Refrigerator and range 2001-12	MSL/ 7 000	827 00	0 00	827 00	827 00	0 00	827 00
04/26/04	Laser printer 2004-04	M*200/ 5 000	948 00	0 00	948 00	893 00	55 00	948 00
06/30/04	Imaging Unit 2004-06	M*200/ 5 000	894 00	0 00	894 00	843 00	51 00	894 00
10/31/04	Xerox Phaser 7300 color printer 2004-10	M*200/ 5 000	2,600 00	0 00	2,600 00	2,450 00	150 00	2,600 00
12/04/09 A	Laptop & Projector 09-12	MA200/ 5 000	1,830 38	0 00	1,830 38	0 00	366 00	366 00
Grand totals	1610 - FURNITURE AND EQUIPMENT (14 assets)		8,888 09	0 00	8,888 09	6,801 71	622 00	7,423 71

Form **8868**
(Rev April 2009)
Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

▶ **File a separate application for each return.**

OMB No 1545-1709

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** and check this box ▶ [X]
- 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

Part I **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*

Type or print	Name of Exempt Organization	**Employer identification number**
File by the due date for filing your return See instructions	Putnam County Farm Bureau, Inc	35-0886084
	Number, street, and room or suite no If a P O box, see instructions 1001 N Jackson Street	
	City, town or post office, state, and ZIP code For a foreign address, see instructions Greencastle IN 46135	

Check type of return to be filed (file a separate application for each return)

[ ] Form 990	[ ] Form 990-T (corporation)	[ ] Form 4720
[ ] Form 990-BL	[ ] Form 990-T (sec 401(a) or 408(a) trust)	[ ] Form 5227
[X] Form 990-EZ	[ ] Form 990-T (trust other than above)	[ ] Form 6069
[ ] Form 990-PF	[ ] Form 1041-A	[ ] Form 8870

- The books are in the care of ▶ Indiana Farm Bureau 225 S East Street Indianapolis IN 46202

Telephone No ▶ (317) 692-7851 FAX No ▶

- If the organization does not have an office or place of business in the United States, check this box ▶ [ ]
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) 0963 If this is for the whole group, check this box ▶ [ ] If it is for part of the group, check this box ▶ [X] 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 8/15/2010, to file the exempt organization return for the organization named above The extension is for the organization's return for
▶ [ ] calendar year ____ or
▶ [X] tax year beginning 1/1/2009 , and ending 12/31/2009

2 If this tax year is for less than 12 months, check reason [ ] Initial return [ ] Final return [ ] Change in accounting period

3 a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions	**3a**	$
b	If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit	**3b**	$
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) See instructions	**3c**	$ 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