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Form **990-EZ****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.

Department of the Treasury
Internal Revenue Service

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
Johnson County Farm Bureau, Inc
 Number and street (or P O box, if mail is not delivered to street address) Room/suite
99 North Morton Street
 City, town, or country State ZIP + 4
Franklin IN 46131-2157

D Employer identification number 35-0887415

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. \$ 151,810

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

		1	2	3	4	5a	5b	5c	6a	6b	6c	7a	7b	7c	8	9	
Revenue	1	Contributions, gifts, grants, and similar amounts received	1,434														
	2	Program service revenue including government fees and contracts	22,961														
	3	Membership dues and assessments	32,612														
	4	Investment income	94,803														
	5a	Gross amount from sale of assets other than inventory	0														
	5b	Less cost or other basis and sales expenses	0														
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	0														
	6	Special events and activities (complete applicable parts of Schedule B. If any amount is from gaming, check here ☐)															
	6a	Gross revenue (not including \$ of contributions reported on line 1)	0														
	6b	Less direct expenses other than fundraising expenses	0														
6c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	0															
Expenses	7a	Gross sales of inventory, less returns and allowances															
	7b	Less cost of goods sold															
	7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	0														
	8	Other revenue (describe ►)	0														
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	151,810														
	10	Grants and similar amounts paid (attach schedule)	7,718														
	11	Benefits paid to or for members															
	12	Salaries, other compensation, and employee benefits	9,711														
	13	Professional fees and other payments to independent contractors	2,522														
	14	Occupancy, rent, utilities, and maintenance	17,508														
Net Assets	15	Printing, publications, postage, and shipping	602														
	16	Other expenses (describe ► See Attached Statement)	138,818														
	17	Total expenses. Add lines 10 through 16	176,879														
	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	-25,069														
	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)	577,783														
	20	Other changes in net assets or fund balances (attach explanation)	0														
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	552,714														
	22	Cash, savings, and investments	181,410														
	23	Land and buildings	394,362														
	24	Other assets (describe ► See Attached Statement)	10,079														
25	Total assets	585,851															
26	Total liabilities (describe ► See Attached Statement)	8,068															
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	577,783															

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	181,410	165,304
23 Land and buildings	394,362	376,854
24 Other assets (describe ► See Attached Statement)	10,079	10,556
25 Total assets	585,851	552,714
26 Total liabilities (describe ► See Attached Statement)	8,068	0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	577,783	552,714

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form **990-EZ** (2009)

(HTA)

Part III Statement of Program Service Accomplishments (See the instructions for Part III.)		Expenses	
What is the organization's primary exempt purpose? <u>See statement 1 attached</u>		(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others.)	
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			
28	<u>See statement 2 attached</u>		
	(Grants \$ <u>0</u>) If this amount includes foreign grants, check here ☐	28a	<u>0</u>
29			
	(Grants \$ <u>0</u>) If this amount includes foreign grants, check here ☐	29a	<u>0</u>
30			
	(Grants \$ <u>0</u>) If this amount includes foreign grants, check here ☐	30a	<u>0</u>
31	Other program services (attach schedule)		
	(Grants \$ <u>0</u>) If this amount includes foreign grants, check here ☐	31a	<u>0</u>
32	Total program service expenses. (add lines 28a through 31a)	32	<u>0</u>

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
Tracy Mabry 99 North Morton Street Franklin IN 46131-2157	Title President Hr/WK 5 00	1,330	0	0
Matt Davis 99 North Morton Street Franklin IN 46131-2157	Title Vice President Hr/WK 4 00	960	0	0
Nancy Voris 99 North Morton Street Franklin IN 46131-2157	Title Secretary Hr/WK 4 00	1,080	0	0
Tom Bechman 99 North Morton Street Franklin IN 46131-2157	Title Treasurer Hr/WK 4 00	710	0	0
Amy Spurgeon 99 North Morton Street Franklin IN 46131-2157	Title Women's Leader Hr/WK 4 00	1,130	0	0
David Harrell 99 North Morton Street Franklin IN 46131-2157	Title YF Representative Hr/WK 2 00	550	0	0
Sunshine Harrell 99 North Morton Street Franklin IN 46131-2157	Title YF Representative Hr/WK 2 00	150	0	0
Carla Bechman 99 North Morton Street Franklin IN 46131-2157	Title Director Hr/WK 1 00	210	0	0
Jim Black 99 North Morton Street Franklin IN 46131-2157	Title Director Hr/WK 1 00	150	0	0
Nancie Bush 99 North Morton Street Franklin IN 46131-2157	Title Director Hr/WK 1 00	330	0	0
John Canary 99 North Morton Street Franklin IN 46131-2157	Title Director Hr/WK 1 00	180	0	0
Andy Duckworth 99 North Morton Street Franklin IN 46131-2157	Title Director Hr/WK 1 00	300	0	0
Bill Dunn 99 North Morton Street Franklin IN 46131-2157	Title Director Hr/WK 1 00	270	0	0
James Face mire 99 North Morton Street Franklin IN 46131-2157	Title Director Hr/WK 1 00	240	0	0
Becky Haveman 99 North Morton Street Franklin IN 46131-2157	Title Director Hr/WK 1 00	330	0	0
Amy Kelsay 99 North Morton Street Franklin IN 46131-2157	Title Director Hr/WK 1 00	0	0	0
Joe Kelsay 99 North Morton Street Franklin IN 46131-2157	Title Director Hr/WK 1 00	150	0	0
John McClain 99 North Morton Street Franklin IN 46131-2157	Title Director Hr/WK 1 00	210	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		X
34 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes		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?	X	
b If "Yes," has it filed a tax return on Form 990-T for this year?	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		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?		X
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?		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		
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		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)? 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 ? 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		
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ		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		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."

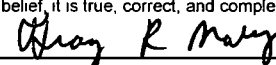
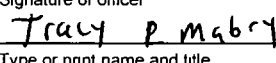
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Name <u>None</u> Str _____ City _____ ST ZIP _____	Title _____ 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 <u>None</u> 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.			
	 Signature of officer		Date <u>1-9-10</u>	
Paid Preparer's Use Only	 Type or print name and title		President	
	Preparer's signature	Date	Check if self-employed ☐	Preparer's identifying number (See instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4 <u>Indiana Farm Bureau Inc</u> <u>P O Box 1290, Indianapolis, IN 46206</u>	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

[illegible]

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

138,818

1	Travel	1	1,922
2	Meals and entertainment	2	70
3	Fundraising	3	
4	Amortization	4	0
5	Conferences, conventions, and meetings	5	2,309
6	Depreciation	6	3,522
7	Depletion	7	
8	Equipment rental and maintenance	8	
9	Interest	9	
10	Supplies	10	
11	Telephone	11	
12	Unrelated business income taxes	12	0
13	Membership services	13	0
14	Ag Promotion	14	36,828
15	District Dues	15	0
16	Miscellaneous Expenses	16	1,722
17	Building Expenses for leased space	17	92,445
18	Unrelated Business Income Taxes, State	18	0
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

		10,079	10,556
Description		Beginning	End
1	Accounts Receivable	0	0
2	Prepaid Expenses	0	0
3	Equipment, net of accumulated depreciation	10,079	10,556
4			
5			
6			
7			
8			
9			
10			

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

8,068

0

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	8,068	0
6	Note Payable	0	0
7			
8			
9			
10			

Johnson County Farm Bureau, Inc.
35-0887415
Statement 2

2009 Form 990-EZ, Page 2, Part III – Organization's Program Achievements or Accomplishments

Line 28 – Johnson County Farm Bureau, Inc. provides much needed financial assistance to the local food pantries that serve Johnson County and surrounding areas.

Johnson County Farm Bureau contributed \$2,000 to each of three food pantries.

Total contributed to achievement #1 \$6,000

Line 29 – Johnson County Farm Bureau, Inc. helps to promote the local 4-H program and animal agriculture by purchasing animals at the 4-H livestock auction at the local county fair. 22 4-H members received money for their animals from Johnson County Farm Bureau. The 4-H members often use this money to further their education or increase their livestock production.

3 volunteers contributed a total of 18 hours to purchasing animals at this auction.

Johnson County Farm Bureau contributed a total of \$9,419 to these 22 4-H members.

Total contributed to achievement #2 \$9,419

ASSET DEPRECIATION SHORT REPORT

JOHNSON COUNTY FARM BUREAU Dec. 31, 2009

Sorted ASSET A/C# and Location
Method 1-FEDERAL-Std Conv AppliedRange 1500-00 - 1610-00
Include All assets

						Includes Section 179		
Date Acq	Description	Meth/Life	Cost	Section 179	Depr Basis	Beg A/Depr	Curr Depr	End A/Depr
ASSET A/C#: 1500-00 - LAND								
Location: FRANKLIN								
12/01/65	Land - 99 Morton Street	MAN/99 00	9,320 00	0 00	9,320 00	0 00	0 00	0 00
12/01/65	Land, 51 Morton Street	MAN/99 00	25,000 00	0 00	25,000 00	0 00	0 00	0 00
12/01/65	Land, Madison Street	MAN/99 00	12,793 50	0 00	12,793 50	0 00	0 00	0 00
Grand totals: FRANKLIN - (3 assets)			47,113 50	0 00	47,113 50	0 00	0 00	0 00
Location: WHITE RVR								
12/01/65	Land, 341 St Rd 135	MAN/99 00	11,042 15	0 00	11,042 15	0 00	0 00	0 00
Grand totals: WHITE RVR - (1 assets)			11,042 15	0 00	11,042 15	0 00	0 00	0 00
Grand totals 1500-00 - LAND (4 assets)			58,155 65	0 00	58,155 65	0 00	0 00	0 00
ASSET A/C#: 1600-00 - BUILDING								
Location: FRANKLIN								
12/01/65	BUILDING	SL/50 00	37,690 26	0 00	37,690 26	28,853 26	754 00	29,607 26
06/01/87	REPLACE FURNACE	SL/20 00	1,150 00	0 00	1,150 00	1,150 00	0 00	1,150 00
03/01/90	NEW OFFICE ADDITION	MACRS/31 50	177,134 90	0 00	177,134 90	106,837 90	5,623 00	112,460 90
08/01/95	REPLACE A/C CONDENSOR	SL/10 00	950 00	0 00	950 00	950 00	0 00	950 00
03/01/96	REPLACE SIDEWALK	SL/15 00	8,000 00	0 00	8,000 00	6,796 00	533 00	7,329 00
12/01/96	ASPHALT PARKING LOT	SL/15 00	5,518 18	0 00	5,518 18	4,447 18	368 00	4,815 18
05/01/98	WALLS IN AGENT OFFICES	SL/20 00	17,712 65	0 00	17,712 65	10,335 65	886 00	11,221 65
05/01/98	CARPET ENTIRE OFFICE	SL/ 5 00	6,875 60	0 00	6,875 60	6,875 60	0 00	6,875 60
Grand totals: FRANKLIN - (8 assets)			255,031 59	0 00	255,031 59	166,245 59	8,164 00	174,409 59
Location: WHITE RVR								
12/01/75	BUILDING	SL/50 00	65,869 79	0 00	65,869 79	39,904 79	1,317 00	41,221 79
12/01/88	REPLACE ROOF	SL/20 00	4,250 00	0 00	4,250 00	3,364 00	213 00	3,577 00
11/01/96	PAINT EXTERIOR	SL/10 00	1,377 55	0 00	1,377 55	1,377 55	0 00	1,377 55
10/01/98	ADDITION & REMODELING	MACRS/39 00	304,741 95	0 00	304,741 95	84,172 95	7,814 00	91,986 95
09/01/99	RESURFACE FRONT LOT	SL/ 5 00	3,350 00	0 00	3,350 00	3,350 00	0 00	3,350 00
Grand totals: WHITE RVR - (5 assets)			379,589 29	0 00	379,589 29	132,169 29	9,344 00	141,513 29
Grand totals 1600-00 - BUILDING (13 assets)			634,620 88	0 00	634,620 88	298,414 88	17,508 00	315,922 88
ASSET A/C#: 1610-00 - FURNITURE & EQUIPMENT								
Location:								
08/03/82	GOLD STACKING ARM CHAIRS (36)	MA200/ 7 00	931 50	0 00	931 50	931 50	0 00	931 50
08/03/82	SAM 30" X 96" FOLDING TABLES (5)	MA200/ 7 00	285 38	0 00	285 38	285 38	0 00	285 38
06/19/85 D	MERITOR PHONE FOR BOARD ROOM (1)	MA200/ 7 00	218 60	0 00	218 60	218 60	0 00	218 60
02/20/86	MAGNAVOX VCR (1)	MA200/ 7 00	250 95	0 00	250 95	250 95	0 00	250 95
02/20/86	ZENITH 19" TV (1)	MA200/ 7 00	207 90	0 00	207 90	207 90	0 00	207 90
05/10/90	OAK DROPLEAF TABLE (1)	MA200/ 7 00	114 45	0 00	114 45	114 45	0 00	114 45
05/10/90	OAK DINING CHAIRS (2)	MA200/ 7 00	94 50	0 00	94 50	94 50	0 00	94 50
06/11/07	Milkshake Machine for Fairgrounds	MA200/ 7 00	14,450 00	0 00	14,450 00	5,603 00	2,528 00	8,131 00
07/16/07	Used Cooler Inv 798948 Black Bro Re	MA200/ 7 00	995 00	0 00	995 00	386 00	174 00	560 00
12/29/07	Computer	MA200/ 5 00	1,296 80	0 00	1,296 80	674 00	249 00	923 00
08/18/09 A	Milkshake Machine	MA200/ 7 00	4,000 00	0 00	4,000 00	0 00	571 00	571 00
Grand totals: - (11 assets)			22,845 08	0 00	22,845 08	8,766 28	3,522 00	12,288 28
Less: 1 Disposed assets (Current Depreciation: \$0.00)			218 60	0 00	218 60	218 60		218 60
Net totals: - (10 assets)			22,626 48	0 00	22,626 48	8,547 68	3,522 00	12,069 68
Grand totals 1610-00 - FURNITURE & EQUIPMENT (11 assets)			22,845 08	0 00	22,845 08	8,766 28	3,522 00	12,288 28
Less 1 Disposed assets (Current Depreciation \$0 00)			218 60	0 00	218 60	218 60		218 60
Net totals 1610-00 - FURNITURE & EQUIPMENT (10 assets)			22,626 48	0 00	22,626 48	8,547 68	3,522 00	12,069 68

ASSET DEPRECIATION SHORT REPORT

JOHNSON COUNTY FARM BUREAU Dec. 31, 2009

Sorted ASSET A/C# and Location

Method 1-FEDERAL-Std Conv Applied

Range 1500-00 - 1610-00

Include All assets

Date Acq	Description	Meth/Life	Cost	Section 179	Depr Basis	Includes Section 179		
						Beg A/Depr	Curr Depr	End A/Depr
	Grand totals for all accounts: (28 assets)		715,621 61	0 00	715,621 61	307,181 16	21,030 00	328,211 16
	Less: 1 Disposed assets (Current Depreciation: \$0.00)		218 60	0 00	218 60	218 60		218 60
	Net totals for all accounts: (27 assets)		715,403 01	0 00	715,403 01	306,962 56	21,030 00	327,992 56

Codes that may appear next to the date acquired include: A - Addition, D - Disposal, T - Traded, MQ - Mid Quarter Applied

Additional Summary Statistics:	Cost	Curr Yr 179	Prior Yr 179	Depr Basis	Beg A/Depr	Curr Depr	Ending A/Depr	Net Book Val
Grand Totals for All Assets	715,621 61	0 00	0 00	715,621 61	307,181 16	21,030 00	328,211 16	387,410 45
Less Inactive Assets	0 00	0 00	0 00	0 00	0 00	0 00	0 00	0 00
Disposed Assets	218 60	0 00	0 00	218 60	218 60	0 00	218 60	0 00
Traded Assets	0 00	0 00	0 00	0 00	0 00	0 00	0 00	0 00
Net Totals (Active Assets)	715,403 01	0 00	0 00	715,403 01	306,962 56	21,030 00	327,992 56	387,410 45

Total Additional First Year Depreciation Taken at 30% Rate: 0.00

Total Additional First Year Depreciation Taken at 50% Rate: 0.00

Total Additional First Year Depreciation Taken: 0.00