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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

2009

Open to Public
InspectionENVELOPE
POST MARK DATE
AUG 13 2010

A For the 2009 calendar year, or tax year beginning	1/1/2009	, and ending	12/31/2009
B Check if applicable	D Employer identification number		
Address change	35-0917141		
Name change	E Telephonenumber		
Initial return	(317) 692-7851		
Terminated	F GroupExemption		
Amended return	Number ► 0963		
Application pending	G AccountingMethod		
Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).			
H Check ► <input checked="" type="checkbox"/> if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)			
Website: ► n/a			
Tax-exempt status (check only one) — <input checked="" type="checkbox"/> 501(c)(5) ◀ (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			

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 ► \$ 110,015

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

1 Contributions, gifts, grants, and similar amounts received	1	0
2 Program service revenue including government fees and contracts	2	877
3 Membership dues and assessments	3	44,160
4 Investment income	4	64,978
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 ► <input type="checkbox"/>		
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	110,015
10 Grants and similar amounts paid (attach Schedule)	10	4,142
11 Benefits paid to or for members	11	
12 Salaries, other compensation, and employee benefits	12	18,728
13 Professional fees and other payments to independent contractors	13	3,509
14 Occupancy, rent, utilities, and maintenance	14	41,288
15 Printing, publications, postage, and shipping	15	252
16 Other expenses (describe ► See Attached Statement)	16	58,543
17 Total expenses. Add lines 10 through 16 ►)	17	126,462
18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-16,447
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	267,243
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	250,796

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	162,762	22 153,524
23 Land and buildings	104,055	23 96,994
24 Other assets (describe ► See Attached Statement)	426	24 278
25 Total assets	267,243	25 250,796
26 Total liabilities (describe ► See Attached Statement)	0	26 0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	267,243	27 250,796

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

(HTA)

Part III Statement of Program Service Accomplishments (See the instructions for Part III.)					Expenses (Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)	
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.						
28 see statement 2						
(Grants \$ 0) If this amount includes foreign grants, check here . . . ► <input type="checkbox"/> 28a 0						
29						
(Grants \$ 0) If this amount includes foreign grants, check here . . . ► <input type="checkbox"/> 29a 0						
30						
(Grants \$ 0) If this amount includes foreign grants, check here . . . ► <input type="checkbox"/> 30a 0						
31 Other program services (attach schedule)	(Grants \$ 0) If this amount includes foreign grants, check here . . . ► <input type="checkbox"/> 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		
Rust, Jacob 1304 E. Evans Avenue Valparaiso IN 46383-4329	Title President Hr/WK 5.00	2,680	0	0		
Gutt, Edwin 1304 E. Evans Avenue Valparaiso IN 46383-4329	Title Vice President Hr/WK 4.00	1,410	0	0		
Morrow, Debbie 1304 E Evans Avenue Valparaiso IN 46383-4329	Title Secretary/Treasurer Hr/WK 4.00	920	0	0		
Rust, Katy 1304 E Evans Avenue Valparaiso IN 46383-4329	Title Women's Leader Hr/WK 4.00	2,510	0	0		
Birky, Gene 1304 E Evans Avenue Valparaiso IN 46383-4329	Title Director Hr/WK 1.00	400	0	0		
Birky, Mary 1304 E Evans Avenue Valparaiso IN 46383-4329	Title Director Hr/WK 1.00	340	0	0		
Burke, Phillip 1304 E Evans Avenue Valparaiso IN 46383-4329	Title Director Hr/WK 1.00	100	0	0		
Conley, Richard 1304 E. Evans Avenue Valparaiso IN 46383-4329	Title Director Hr/WK 1.00	100	0	0		
Conru, Reva 1304 E Evans Avenue Valparaiso IN 46383-4329	Title Director Hr/WK 1.00	100	0	0		
Garriott, James 1304 E Evans Avenue Valparaiso IN 46383-4329	Title Director Hr/WK 1.00	180	0	0		
Gutt, Vernetta 1304 E Evans Avenue Valparaiso IN 46383-4329	Title Director Hr/WK 1.00	1,490	0	0		
Hardesty, Barbara 1304 E Evans Avenue Valparaiso IN 46383-4329	Title Director Hr/WK 1.00	280	0	0		
Hardesty, Bob 1304 E. Evans Avenue Valparaiso IN 46383-4329	Title Director Hr/WK 1.00	320	0	0		
Hineline, James 1304 E Evans Avenue Valparaiso IN 46383-4329	Title Director Hr/WK 1.00	795	0	0		
Hineline, Pat 1304 E Evans Avenue Valparaiso IN 46383-4329	Title Director Hr/WK 1.00	870	0	0		
Kalas, George 1304 E Evans Avenue Valparaiso IN 46383-4329	Title Director Hr/WK 1.00	50	0	0		
Krause, Jerry 1304 E Evans Avenue Valparaiso IN 46383-4329	Title Director Hr/WK 1.00	50	0	0		
Kreiger, Dorothy 1304 E Evans Avenue Valparaiso IN 46383-4329	Title Director Hr/WK 1.00	500	0	0		

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

33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity.

	Yes	No
33		X
34		X

34 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes.

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?

b If "Yes," has it filed a tax return on Form 990-T for this year?

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.

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?

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?

b If "Yes," complete Schedule L, Part II and enter the total amount involved

39 Section 501(c)(7) organizations Enter

a Initiation fees and capital contributions included on line 9

b Gross receipts, included on line 9, for public use of club facilities

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

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

	Yes	No
42b		X
42c		X

44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ

	Yes	No
44		X
45		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

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

46 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I. Yes No
 46 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

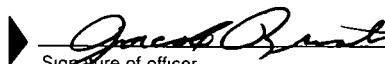
50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(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	Title			
City ST ZIP	Hr/WK 00	0	0	0
Name Str	Title			
City ST ZIP	Hr/WK 00	0	0	0
Name Str	Title			
City ST ZIP	Hr/WK 00	0	0	0
Name Str	Title			
City ST ZIP	Hr/WK 00	0	0	0
Name Str	Title			
City ST ZIP	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 ►		

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

Sign Here	Signature of officer  JACK RUST, president	Date 7-30-10		
	Type or print name and title	Date 7-30-10		
Paid Preparer's Use Only	Preparer's signature 	Date 7/27/2010	Check if self-employed <input type="checkbox"/>	Preparer's identifying number (See instructions) EIN ► Phone no ► (317) 692-7851
	Firm's name (or yours if self-employed), address, and ZIP + 4 Indiana Farm Bureau Inc P O Box 1290, Indianapolis, IN 46206			

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

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 farm products, keep members abreast of policies and new developments
2	_____	_____
3	_____	_____
4	_____	_____
5	_____	_____
6	_____	_____
7	_____	_____
8	_____	_____
9	_____	_____
10	_____	_____

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

		58,543
1 Travel	1	13,800
2 Meals and entertainment	2	28
3 Fundraising	3	
4 Amortization	4	0
5 Conferences, conventions, and meetings	5	8,308
6 Depreciation	6	235
7 Depletion	7	
8 Equipment rental and maintenance	8	
9 Interest	9	
10 Supplies	10	
11 Telephone	11	
12 Unrelated business income taxes	12	35
13 Membership services	13	1,588
14 Ag Promotion	14	15,503
15 District Dues	15	727
16 Miscellaneous Expenses	16	630
17 Building Expens for leased space	17	17,509
18 Unrelated Business Income Taxes, State	18	0
19 Political Contributions	19	0
20 Disposal of Sharp copier	20	180
21	21	
22	22	
23	23	
24	24	
25	25	
26	26	
27	27	
28	28	

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

	Description	Beginning	End
1	Accounts Receivable	0	0
2	Prepaid Expenses	0	0
3	Equipment, net of accumulated depreciation	426	278
4			
5			
6			
7			
8			
9			
10			

Porter County Farm Bureau, Inc.
35-0917141

12/31/2009 year end

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

Line 28 - Porter County Farm Bureau, Inc. supports the youth in the county and encourages secondary education through a scholarship program. One scholarship is presented to a graduating senior from each of the nine county schools and two scholarships are presented to the two FFA members who attend the Porter County Farm Bureau, Inc. board meetings. The amounts of the scholarships are \$750 for a Farm Bureau member, \$500 for the FFA representatives, and \$375 for a non-Farm Bureau member.

Applications were taken to the high schools in January. Completed applications were returned and judged in April. The scholarships were awarded at local school award nights in May and June. Three sessions were held to complete this program: judging selection, school award programs, and a banquet to distribute the checks to the winners

Nine board members spent 4 hours delivered applications to the schools. Two committee members and three judges chose scholarship winners in approximately five hours. Nine board members presented the scholarship certificates to recipients at the school award nights and the recipients' checks at the banquet, taking approximately ten hours. Overall, a total of 151 volunteer hours were used to carry out this program.

Porter County Farm Bureau contributed \$6,250 for the actual scholarships, \$150 for dinner for the judges, \$60 for volunteer expenses, and \$891 for the scholarship banquet

Total contributed to achievement #1	\$7,351
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Line 29 - Porter County Farm Bureau, Inc. represented Farm Bureau with a booth at the local county fair. This was done to make people aware of agricultural issues and attract membership in the organization. For the 11 days of the fair, a 40-foot by 50-foot booth in a building at the fairgrounds was used. The displays in the booth consisted of Indiana Farm Bureau, Inc. displays, miniature golf, free popcorn, snack recipes with samples, prize wheels with agriculture-related questions, samples of products grown in Porter County, and an agricultural information quiz board. For 2 days, there was an E85 (ethanol fuel) truck exhibit, also.

77 volunteers contributed a total of 10,010 volunteer hours in coordinating and carrying out these activities over the 11 days of the fair. Over 11,000 fair-goers visited the booth

Porter County Farm Bureau, Inc. contributed \$2,771 for supplies, give-away items, and volunteer expenses

Total contributed to achievement #2	\$2,771
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Line 30 - Porter County Farm Bureau, Inc. prepares recommendations of local, state, and national policy concerns to be suggested to the Indiana Farm Bureau, Inc. and the local county commissioners and county council. This is completed at the Annual Spring Policy Recommendation Banquet and Meeting. Invitations are sent to all voting members of the organization. Over 100 voting members were involved in deciding which policies are important, approving and accepting the policy recommendations. Members are also given the opportunity to express their needs and concerns about the organization.

The Policy Committee works year-round with diligent meetings in January, February, and March in preparation of the Annual Spring Banquet. Policy recommendation booklets are published for the voting members to look over prior to voting.

The Policy Committee consisted of 12 members who contributed a total of 97 volunteer hours in coordinating and preparing policy recommendations

Porter County Farm Bureau, Inc. contributed \$2,576 for volunteer expenses and the banquet

Total contributed to achievement #3	\$2,576
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ASSET DEPRECIATION SHORT REPORT
 PORTER COUNTY FARM BUREAU Dec. 31, 2009

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

Range 1600-00 - 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
ASSET A/C#: 1600-00 - BUILDING								
12/31/74	BUILDING 1974-12	SL/50 000	160,378 09	0 00	160,378 09	109,723 09	3,208 00	112,931 09
12/31/86	CHAIN LINK FENCE 1986-12	SL/20 000	1,363 00	0 00	1,363 00	1,363 00	0 00	1,363 00
12/31/90	REMODELING 1990-12	SL/50 000	2,605 50	0 00	2,605 50	988 50	52 00	1,040 50
06/30/92	REPLACE ROOF 1992-06	MSL/20 000	11,270 00	0 00	11,270 00	9,878 00	564 00	10,442 00
12/14/94	2 FURNACES, 4 AIR CONDITIONERS 1994-12	MSL/15 000	16,220 00	0 00	16,220 00	15,224 00	996 00	16,220 00
12/23/96	CARPET MGR'S OFFICE 1996-12	MA200/ 7 000	1,263 88	0 00	1,263 88	1,263 88	0 00	1,263 88
01/23/98	6 PRIVATE OFFICES 1998-01	MSL/20 000	40,729 30	0 00	40,729 30	22,227 30	2,036 00	24,263 30
02/12/98	WALLPAPER, PAINT 1998-02	MSL/10 000	3,092 25	0 00	3,092 25	3,092 25	0 00	3,092 25
02/28/98	REPLACE CARPET 1998-02	MSL/ 5 000	9,336 85	0 00	9,336 85	9,336 85	0 00	9,336 85
06/24/98	PAINT, REMODEL BOARDROOM 1998-06	MSL/10 000	3,479 10	0 00	3,479 10	3,479 10	0 00	3,479 10
08/31/98	PAVING 1998-08	MSL/10 000	12,000 00	0 00	12,000 00	12,000 00	0 00	12,000 00
05/24/99	LANDSCAPING 1999-05	MSL/ 5 000	5,926 07	0 00	5,926 07	5,926 07	0 00	5,926 07
12/01/02	CHAIR LIFT 2002-12	MACRS/39 000	8,005 95	0 00	8,005 95	1,239 27	205 00	1,444 27
Grand totals	1600-00 - BUILDING (13 assets)		275,669 99	0 00	275,669 99	195,741 31	7,061 00	202,802 31
ASSET A/C#: 1610-00 - FURNITURE & EQUIPMENT								
10/01/70	CHAIRS (53) 1970-10	MA200/ 7 000	680 92	0 00	680 92	680 92	0 00	680 92
10/01/70	TABLES (5) 1970-10	MA200/ 7 000	295 80	0 00	295 80	295 80	0 00	295 80
10/01/70 D	CHAIRS (27) 1970-10	MA200/ 7 000	346 89	0 00	346 89	346 89	0 00	346 89
06/01/71	CHAIRS (50) 1971-06	MA200/ 7 000	321 30	0 00	321 30	321 30	0 00	321 30
01/01/72	CHAIRS (50) 1972-01	M*200/ 7 000	277 95	0 00	277 95	277 95	0 00	277 95
02/01/72	COAT RACK CADDIES (3) 1972-02	MA200/ 7 000	175 75	0 00	175 75	175 75	0 00	175 75
05/01/81	TABLES (15) 1981-05	MA200/ 7 000	1,125 00	0 00	1,125 00	1,125 00	0 00	1,125 00
05/01/81 D	TABLE TRUCK (1) 1981-05	MA200/ 7 000	142 00	0 00	142 00	142 00	0 00	142 00
06/01/84	SOUNDCRAFT SOUND SYSTEM (1) 1984-06	MA200/ 7 000	565 11	0 00	565 11	565 11	0 00	565 11
10/01/87	CHAIRS AND CART (44) 1987-10	MA200/ 7 000	487 00	0 00	487 00	487 00	0 00	487 00
09/01/95	REFRIGERATOR (1) Kitchen-Aid 1995-09	MSL/10 000	681 45	0 00	681 45	681 45	0 00	681 45
06/01/00	VIDEO CASSETTE RECORDER (1) 2000-06	MSL/ 5 000	262 50	0 00	262 50	262 50	0 00	262 50
06/01/03	Popcorn Popper 2003-06	M*200/ 7 000	985 88	0 00	985 88	854 00	98 00	952 00
10/18/04	Table Toter 2004/10	M*200/ 7 000	373 13	0 00	373 13	289 00	44 00	333 00
02/21/05 D	Sharp copier model #AL-1641Cs 2005-02	MA200/ 7 000	673 06	0 00	673 06	463 00	30 00	493 00

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

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

Range 1600-00 - 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
ASSET A/C#: 1610-00 - FURNITURE & EQUIPMENT								
02/19/09 A	Copier 2009-02	MA200/ 5 000	266 72	0 00	266 72	0 00	63 00	63 00
Grand totals	1610-00 - FURNITURE & EQUIPMENT (16 assets)		7,660 46	0 00	7,660 46	6,967 67	235 00	7,202 67
Less	3 Disposed assets (Current Depreciation \$30 00)		1,161 95	0 00	1,161 95	951 89		981 89
Net totals	1610-00 - FURNITURE & EQUIPMENT (13 assets)		6,498 51	0 00	6,498 51	6,015 78	235 00	6,220 78
Grand totals for all accounts: (29 assets)			283,330 45	0 00	283,330 45	202,708 98	7,296 00	210,004 98
Less: 3 Disposed assets (Current Depreciation: \$30.00)			1,161 95	0 00	1,161 95	951 89		981 89
Net totals for all accounts: (26 assets)			282,168 50	0 00	282,168 50	201,757 09	7,296 00	209,023 09

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	283,330 45	0 00	0 00	283,330 45	202,708 98	7,296 00	210,004 98	73,325 47
Less Inactive Assets	0 00	0 00	0 00	0 00	0 00	0 00	0 00	0 00
Disposed Assets	1,161 95	0 00	0 00	1,161 95	951 89	30 00	981 89	180 06
Traded Assets	0 00	0 00	0 00	0 00	0 00	0 00	0 00	0 00
Net Totals (Active Assets)	282,168 50	0 00	0 00	282,168 50	201,757 09	7,266 00	209,023 09	73,145 41

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

Form **8868**

(Rev April 2009)

Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

► 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

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 Porter County Farm Bureau, Inc	Employer identification number 35-0917141
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P O. box, see instructions. 1304 E. Evans Avenue	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. Valparaiso, IN 46383-4329	

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

<input type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-T (corporation)	<input type="checkbox"/> Form 4720
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 5227
<input checked="" type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 8870

- The books are in the care of ► Indiana Farm Bureau, Inc

Telephone No ► 317-692-7851

FAX No ► 317-692-7854

- 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) 963. If this is for the whole group, check this box. ► If it is for part of the group, check this box. ► 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 2009 or ► tax year beginning _____, and ending _____.

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

3a	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	\$

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

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.
(HTA)

Form **8868** (Rev. 4-2009)