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Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2010

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2010 calendar year, or tax year beginning 07/01, 2010, and ending 06/30, 2011

- B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Termination
- ☐ Amended return
- ☐ App pending

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

Florida Farm Bureau Federation
P.O. Box 147030
Gainesville, FL 32614-7030

D Employer identification no.

59-0642950

E Telephone number

(352) 378-1321

G Gross receipts \$, 403, 583.

F Name and address of Principal Officer

John L Hoblick
5700 SW 34 Street
Gainesville, FL 32608

H(a) Is this a group return for affiliates? ☐ Yes ☒ NoH(b) Are all affiliates included? ☐ Yes ☐ No
If "NO" attach a list. (See instructions)

H(c) Group Exemption Nr. 1805

I Tax Exempt Status ☐ 501(c)(3) ☒ 501(c)(5) (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: floridafarmbureau.org

K Type of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other

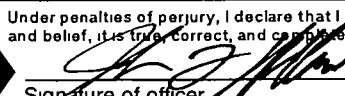
L Year of Formation 1941 M St of legal domicile FL

Part I Summary

1 Briefly describe the organization's mission of most significant activities: We apply joint & collective effort at the county, state and national level to the solution of problems of agriculturalists & rural communities in economic, educational & social fields.																																																									
2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its assets																																																									
3 Number of voting members of the governing body (Part VI, line 1a)	24.																																																								
4 Number of independent voting members of the governing body (Part VI, line 1b)	23.																																																								
5 Total number of individuals employed in calendar year 2010 (Part V, line 2a)	44.																																																								
6 Total number of volunteers (estimate if necessary)	1,906.																																																								
7a Total unrelated business revenue from Part VIII, column (C), line 12	430,459.																																																								
7b Net unrelated business taxable income from Form 990-T, line 34	122,265.																																																								
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Part III Signature Block

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.

Please Sign Here  Date 2/9/12

Signature of officer John L Hoblick (President)
Type or print name and title

Print preparer's name	Preparer's signature	Date	Check if self-employed ☐	PTIN
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Paid Preparer Use Only	Firm's name	Firm's EIN
	Firm's address	Phone no

May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☐ No

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

Form 990 (2010)

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P 4

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response to any question in Part III ☐**1** Briefly describe the organization's mission:

We apply joint & collective effort at the county, state and
national level to the solution of problems of agriculturalists &
rural communities in economic, educational & social fields.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting or make significant changes in how it conducts any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and (4) organization and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each service reported

4a (Code:) (Expenses \$ including grants of \$) (Revenue \$)
The Florida Farm Bureau Women's Program has as its mission, harnessing
the talents and skills of our women to the task of implementing Farm
Bureau policy, goals and objectives. It focuses the unique talents of
women to make Farm Bureau more effective in it's organizational,
legislative, educational and promotional efforts. Any woman that is a
Farm Bureau member is eligible to participate in local, state and
national activities. The Florida Farm Bureau Federation's Women's
Leadership Committee is comprised of a District Women's Chair from
each field district and a representative from the Young Farmer and
Rancher Committee. The committee hosts the annual State Women's
Conference, develops an annual plan and helps coordinate county
Women's Committee activities that support state initiatives.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)
The overarching mission of Florida Farm Bureau's Young Farmer and
Rancher program is to ensure Florida Farm Bureau Federation will have
effective leadership in the future. The program includes the State
YF&R Leadership Group, a select group of individuals between 18 and 35
years of age who participate in a two year leadership curriculum that
includes instruction and travel experiences. This group also hosts
the annual Young Farmer and Rancher Conference that is attended by
members from around the state. Attesting to the effectiveness of
this program is the fact that both our State president and vice
president are alumni of the program.

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)
The County Recognition Program is designed to recognize county Farm
Bureaus for outstanding achievements in meeting their members' needs
and supporting state policy implementation goals. It provides a means
for county Farm Bureaus to share successful program ideas. It also
aims to provide a "Roadmap for Success" that will help county leaders
plan and execute programs that benefit members and support Farm
Bureau policy goals.

4d Other program services (Describe in Schedule O)

(Expenses \$ including grant of \$)(Revenue \$)

4e Total program service expenses \$

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation) If "Yes," complete Schedule A		X
2 Is the organization required to complete Schedule B, Schedule of Contributors? (see instruction)		X
3 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 1		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		
5 Is the organization a Section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		X
6 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		X
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		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
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		X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V		X
11 If the organization's answer to any of the following questions "Yes," then complete Schedule D, Part VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
b Did the organization report an amount for investments--other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	X	
c Did the organization report an amount for investments--program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		X
12a Did the organization obtain a separate, independent audited financial statements for the year? If "Yes," complete Schedule D, Part XI, XII, and XIII	X	
12b Was the organization included in a consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Part XI, XII, and XIII is optional	X	
13 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Parts I and IV		X
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, Parts II and IV		X
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, Parts III and IV		X
17 Did the organization report more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)		

Part IV Checklist of Required Schedules (Continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	☒	
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	☒	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	☒	
24a Did the organization have a tax-exempt bond issue with an outstanding principle amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to question 25		☒
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a 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		
b Is the organization 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 Form 990 or 990EZ? If "Yes," complete Schedule L, Part I		
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		☒
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or a person related to such an individual? If "Yes," complete Schedule L, Part III		☒
28 Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions).		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		☒
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		☒
c An entity of which a current or former officer, director, trustee, key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV		☒
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		☒
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		☒
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		☒
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		☒
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		☒
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	☒	
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)?		☒
b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 ☐ Yes ☒ No		
36 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		
37 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		☒
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	☒	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response to any question in this Part V ☐

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	21	
b	Enter the number of Forms W-2G included in Line 1a. Enter -0- if not applicable	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (Gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wages and Tax Statements filed for the calendar year ending with or within the year covered by this return	44	
b	If at least one is reported in 2a, did the organization file all required federal employment tax returns?	X	
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 this return?	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	X	
4a	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)?		X
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.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		
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 Form 8282?		
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 benefit contract?		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the org file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		
b	Did the organization make a distribution to a donor, donor advisor or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
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		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state?		
Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI ☒

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body at the end of the year		
1b Enter the number of voting members included in line 1a, above who are independent		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a material diversion of the organization's assets?		X
6 Does the organization have members or stockholders?	X	
7a Did the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	X	
7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	X	
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Service Code)

	Yes	No
10a Does the organization have local chapters, branches, or affiliates?	X	
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates and branches to ensure their operations are consistent with those of the organization?	X	
11a Has the organization provided a copy of the Form 990 to all members of its governing body before filing the form?	X	
b Describe in Schedule O the process, if any, the organization uses to review the Form 990		
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Does the organization regularly and consistently monitor and enforce compliance with policy? If "Yes," Describe in Schedule O how this is done	X	
13 Does the organization have a written whistleblower policy?	X	
14 Does the organization have a written document retention and destruction policy?	X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	X	
b Other officers or key employees of the organization	X	
If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions)		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed **FL**

18 IRC Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization:

See schedule

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response to any questions in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Comensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calander year ending with or within the organization's tax year

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

- List all of the organization's **current** key employees. See instructions for definition of "key employee."

- 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) of 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 not compensate any current officer, director, or trustee

Check this box if the organization did not compensate any current officer, director, or trustee										
(A) Name and Title	(B) Average hours per week (describe hours for related org in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		I n d i v i d u a l	T r u s t e e	O f f i c e r	K e y e m p l o y e e	H i g h l y c o m p	F o r m e r			
(1) Jerry Davis Director	2	X						0	0	9172
(2) Jon Deas Director	2	X						0	0	15676
(3) Nick Dillard Director	2	X						0	0	0
(4) Michael Dooner Director	2	X						0	0	10386
(5) Dalton Dowdy Director	2	X						0	0	5669
(6) Brad Etheridge Director	2	X						0	0	7825
(7) Jeffery Hamrick Director	2	X						0	0	3908
(8) Ken Harrison Director	2	X						0	0	11028
(9) Steve Johnson Director	2	X						0	0	10278
(10) Rod Land Director	2	X						0	0	13074
(11) Jacob Larson Director	2	X						0	0	0
(12) Chris Lyons Director	2	X						0	0	0
(13) Henry McCrone Director	2	X						0	0	6932
(14) Virginia Paarlberg Director	2	X						0	0	7599
(15) Daniel Peterson Director	2	X						0	0	13780
(16) Jeff Pittman Director	2	X						0	0	5930

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) Average hours per week (describe hours for related orgs in schedule O)	(C) Position (check all that apply)							(D) Reportable compensation from the organizations (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		I	D	O	K	H	E	F			
(17) Raymond Roth Director	2	X							0	0	13596
(18) Ed Shadd Director	2	X							0	0	1011
(19) Keith Shiver Director	2	X							0	0	0
(20) Wilton Simpson Director	2	X							0	0	7325
(21) Mark Sodders Director	2	X							0	0	5520
(22) Marion Tidwell Director	2	X							0	0	0
(23) Ron Wetherington Director	2	X							0	0	7022
(24) Michele Williamson Director	2	X							0	0	7991
(25) R. Mark Wilson Director	2	X							0	0	15780
(26) Roy Wilson Director	2	X							0	0	0
(27) Roland Yee Director	2	X							0	0	0
(28) John L Hoblick President	40			X					0	146676	32570
1b Sub-total										146676	212072
c Total from continuation sheets to Part VII, Section A									403414	122275	175433
d Total (add lines 1b and 1c)									403414	268951	387505
2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization											3

- 3** Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee Line 1a? If "Yes," complete Schedule J for such individual
- 4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		X
4	X	
5		X

Section B. Independent Contractors

- 1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation

- 2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VIII Statement of Revenue

			(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
Contributions, gifts, grants and other similar amounts						
1a Federated campaigns	1a	0.				
b Membership Dues	1b	2,301,413.				
c Fundraising events	1c	0.				
d Related organizations	1d	0.				
e Government grants (contributions)	1e	0.				
f All other contributions, gifts, grants, & similar amounts not included above	1f	208,399.				
g Noncash contributions included in 1a-1f \$		0.				
h Total. Add lines 1a-1f			2,509,812.			
Program Service Revenue						
		Business Code				
2a Sponsorships		541800	100,000.			100,000.
b Project Revenue		561000	86,442.	82,210.	4,232.	
c						
d						
e						
f All other program service revenue						
g Total. Add lines 2a-2f			186,442.			
3 Investment income (including dividends, interest and other similar amounts)			42,377.			42,377.
4 Income from investment of tax-exempt bond proceeds			0.			0.
5 Royalties			3,207,800.			3,207,800.
6a Gross Rents	(i) Real	(ii) Personal				
	0.	0.				
b Less: rental expenses	0.	0.				
c Rental income or (loss)	0.	0.				
d Net rental income or (loss)			0.			0.
7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	0.	0.				
b Less: cost or other basis and sales expenses	0.	872.				
c Gain or (loss)	0.	-872.				
d Net gain or (loss)			-872.			-872.
8a Gross amount from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18		10,652.				
b Less: direct expenses		2,485.				
c Net income or (loss) from fundraising events			8,167.			8,167.
9a Gross income from gaming activities See Part IV, line 19		0.				
b Less: direct expenses		0.				
c Net income or (loss) from gaming activities			0.			0.
10a Gross sales of inventory, less returns and allowance		118,391.				
b Less: cost of goods sold		16,701.				
c Net income or (loss) from sales of inventory			101,690.		101,690.	0.
Miscellaneous Revenue						
		Business Code				
11a Commissions		524298	209,930.		209,930.	
b Member Services & Reimb		561000	133,369.	3,572.	129,797.	
c Allocated to FFB Enterprise		561000	-15,190.		-15,190.	
d All other revenue						
e Total. Add lines 11a-11d			328,109.			
12 Total Revenue See instructions			6,383,525.	85,782.	430,459.	3,357,472.

Part IX Statement of Functional Expenses

Section 501(c)(3) and (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 not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	39295			
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	12450			
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees and key employees	403414			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1852425			
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	613972			
9 Other employee benefits	453848			
10 Payroll taxes	174978			
11 Fees for services (non-employees):				
a Management	0			
b Legal	18676			
c Accounting	15000			
d Lobbying	41625			
e Professional fundraising See Part IV, line 17.	0			
f Investment management fees	0			
g Other	209663			
12 Advertising and promotion	112770			
13 Office Expenses	162899			
14 Information technology	38027			
15 Royalties	0			
16 Occupancy	170687			
17 Travel	347967			
18 Payments of travel or entertainment expenses for any Federal, state or local public officials	0			
19 Conferences, conventions, and meetings	225654			
20 Interest	0			
21 Payments to affiliates	505594			
22 Depreciation, depletion, and amortization	26298			
23 Insurance	0			
24 Other expenses—itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on schedule O.)				
a Subscription Expense	464750			
b Awards & Contributions	87798			
c Dues & Subscriptions	20169			
d Taxes	30721			
e Vehicle/Eqpt Rent & Maint	201658			
f All other expenses	864			
25 Total functional expenses. Add lines 1 through 24f	6231202			
26 Joint Costs. Check ☐ if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheets

		(A) Beginning of year		(B) End of year
ASSETS	1 Cash-non-interest-bearing	75,084.	1	454,168.
	2 Savings and temporary cash investments	6,989,886.	2	6,744,682.
	3 Pledges and grants receivable, net	0.	3	
	4 Accounts receivable, net	279.	4	11,748.
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L	0.	5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) persons described in section 4958(c)(3)(B), and persons described in section 4976(a) (see instructions)	0.	6	
	7 Notes and loans receivable, net	565,365.	7	377,412.
	8 Inventories for sale or use	1,321.	8	8,795.
	9 Prepaid expenses and deferred charges	69,549.	9	50,858.
	10 a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 449,115.		
	b Less accumulated depreciation	10b 317,864.	10c	131,251.
	11 Investments-publicly-traded securities	0.	11	0.
	12 Investments-other securities. See Part IV, line 11	6,455,940.	12	7,039,090.
	13 Investments-program-related. See Part IV, line 11	0.	13	
	14 Intangible assets	0.	14	0.
	15 Other assets. See Part IV, line 11	6,600.	15	0.
16 Total assets. Add 1 through 15 (must equal line 34)	14,308,673.	16	14,818,004.	
LIABILITIES	17 Accounts payable and accrued expenses	518,794.	17	544,218.
	18 Grants payable	0.	18	0.
	19 Deferred revenue	0.	19	0.
	20 Tax-exempt bond liabilities	0.	20	0.
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured Mortgages and notes payable to unrelated third parties	0.	23	0.
	24 Unsecured notes and loans payable to unrelated third parties	0.	24	0.
	25 Other liabilities. Complete Part X of Schedule D	2,770,352.	25	2,547,693.
	26 Total liabilities. Add lines 17 through 25	3,289,146.	26	3,091,911.
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here ☐ and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets		27	
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here ☒ and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds	25,000.	30	25,000.
	31 Paid-in or capital surplus, or land, building, and equipment fund	0.	31	0.
	32 Retained earnings, endowment, accumulated income, or other funds	10,994,527.	32	11,701,093.
	33 Total net assets or fund balances	11,019,527.	33	11,726,093.
	34 Total liabilities and net assets/fund balances	14,308,673.	34	14,818,004.

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response to any question in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	6,383,525.
2	Total Expenses (must equal Part IX, column (A), line 25)	2	6,231,202.
3	Revenue less expenses. Subtract line 2 from line 1	3	152,323.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	11,019,527.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	554,243.
6	Net assets or fund balances at the end of year Combine lines 3, 4, and 5 (Must equal Part X, line 33, column (B))	6	11,726,093.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990. ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	X	
b Were the organization's financial statements audited by an independent accountant?	X	
c If "Yes" to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
d If "Yes" to 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both: ☐ Separate basis ☐ Consolidated basis ☒ Both consolidated and separate basis		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

- **Complete if the organization answered "Yes," to Form 990, that**
Part IV, line 6, 7, 8, 9, 10, 11, or 12.
► **Attach to Form 990. ► See separate instructions.**

OMB No. 1545-0047

2010

**Open to Public
Inspection**

Name of the organization

Florida Farm Bureau Federation

Employer identification number

59-0642950

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor Advised Funds	(b) Funds and Other Accounts
1 Total number at end of year		
2 Aggregate Contributions to (during year)		
3 Aggregate Grants from (during year)		
4 Aggregate value at end of year		
5 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?		☐ Yes ☐ No
6 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 purpose conferring impermissible private benefit?		☐ Yes ☐ No

Part II Conservation Easements Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 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
☐ Protection of natural habitat	☐ Preservation of certified historic structure
☐ Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the year.

	Held at the end of the Year
a Total number of conservation easements	2a
b Total acreage subject to conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ►

4 Number of states in which the organization held a conservation easement is located ►

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ►

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$

8 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 ☐ No

9 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 conservation easements.

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 (ASC 958), 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 (ASC 958), 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	► \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1	► \$
b Assets included in Form 990, Part X	► \$

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (Continued)

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a If the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☒ No

b If "Yes," explain why in Part XIV and complete the following table

	Amount
1c Beginning balance	
1d Additions during the year	
1e Distributions during the year	
1f Ending Balance	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☒ No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds Complete if the organization answered "Yes" to Form 990, Part IV, line 10

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net Investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment ▶ _____ %
b Permanent endowment ▶ _____ %
c Term endowment ▶ _____ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
(ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" to 3a (ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment See Form 990, Part X, line 10

Description of Investment	(a) Cost or other basis (Investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land		12,920.		12,920.
b Buildings		90,039.	53,239.	36,800.
c Leasehold improvements		87,393.	37,227.	50,166.
d Equipment		123,591.	107,333.	16,258.
e Other		135,172.	120,065.	15,107.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c))				131,251.

Part VII Investments—Other Securities. See Form 990, Part X, line 12

59-0642950

(a) Description of security or category (including name of security)	(b) Book Value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other Stock BanCorp	459,900.	C
(A) Stock Certificates	363.	C
(B) Preferred BanCorp Stock	200,000.	C
(C) Stock FFBE	10,000.	C
(D) Stock- Holding & Invstmnt Corp	298,563.	C
(E) Stock FFBIA	500.	C
(F) FFBE Retained Earnings	2949960.	
(G) Holding Corp Retained Earnings	35,244.	
(H) Agency Retained Earnings	3067228.	
(I) FFB Investment Corp Ret Earn	17,332.	
Total. (Column (b) should equal Form 990, Part X, col. (B) line 12.) ▶	7039090.	

Part VIII Investments—Program Related. See Form 990, Part X, line 13

(a) Description of investment type	(b) Book Value	(c) Method of valuation Cost or end-of-year market value
(1)	0.	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) should equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets. See Form 990, Part X, line 15

(a) Description	(b) Book Value
(1)	0.
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) should equal Form 990, Part X, col. (B) line 15.) ▶	0.

Part X Other Liabilities. See Form 990, Part X, line 25

1. (a) Description of liability	(b) Amount
(1) Federal Income Taxes	
(2) Post Retirement Benefit.	1258967.
(3) Pension Benefit Payable.	1329734.
(4) Deferred Tax Benefit.	-41,008.
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) should equal Form 990, Part X, col. (B) line 25.) ▶	2547693.

2. Fin 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total Revenue (Form 990, Part VIII, column (A), line 12)	1	6383525.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	6231202.
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	152,323.
4	Net unrealized gains (losses) on investments	4	0.
5	Donated services and use of facilities	5	0.
6	Investment expenses	6	0.
7	Prior period adjustments	7	0.
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 through 8	9	
10	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	10	152,323.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains and other support per audited financial statements	1	6383820.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	-5.
e	Add lines 2a through 2d	2e	-5.
3	Subtract line 2e from line 1	3	6383825.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	-300.
e	Add lines 4a and 4b	4c	-300.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	6383525.

Part XIII Reconciliation of expenses per Audited Financial Statements With Expense per Return

1	Total expenses and losses per audited financial statements	1	6651761.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	-4.
e	Add lines 2a through 2d	2e	-4.
3	Subtract line 2e from line 1	3	6651765.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	-420,563.
e	Add lines 4a and 4b	4c	-420,563.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	6231202.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5 and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4, Part X, line 2; Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Schedule D, Part VI - Other fixed assets held for investment

Investment description	Cost or Other Basis (Investment)	Cost or Other Basis (Other)	Depreciation	Book value
Furniture & Fixtures		99,982.	91,932.	8,050.
Computer Software		35,190.	28,133.	7,057.
		135,172.	120,065.	15,107.

Part XIV Supplemental Information. (Continued)

Part XII, line 2d - Other on Financial stmt/not on Revenue

Rounding

Part XII, line 4b - Other on Revenue/not on Financial stmt

Fundraiser

Part XIII, line 2d - Other on Financial/not on Func exp

Rounding

Part XIII, line 4b - Other on Func exp/not on Financial

FASB 158 Pension Adj	\$420,263
Fundraising	\$300

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.

Department of the Treasury
Internal Revenue Service
Name of the organization

Florida Farm Bureau Federation

Employer identification number

59-0642950

OMB No 1545-0047

2010

**Open to Public
Inspection**

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed ☐

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	FL FFA Foundation, Inc Palm Beach Gardens, FL 33418	262830802	501 (c) (3)	10,775				
(2)	FL Farm Bureau Scholarship Fu Gainesville, FL 32608	591662473	501 (c) (3)	10,020				
(3)	UF Leadership & Educ Fndtn Gainesville, FL 32611	593104978	501 (c) (3)	8,500				
(4)	Pacific Legal Foundation Sacramento, CA 95834	942197343	501 (c) (3)	5,000				
(5)	Center for Agricultural Educ Gainesville, FL 32608	452824894	501 (c) (3)	5,000				
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								

2 Enter total number of section 501(c)(3) and government organizations 5

3 Enter total number of other organizations 0

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

Schedule I (Form 990) (2010)

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 Scholarships to 2010 State YF&R	1	100			
2 Youth Speech Contest Awards	6	1,050			
3 US Dept of Labor Seminar Sponso	1	200			
4 2010 YF&R Awards	6	4,700			
5 Outstanding Admin Asst Awards	8	3,400			
6 Incentive Awards	26	3,000			
7					

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

1h) Sponsor Awards

2h) Ag in the Classroom, Mini Grants, Agriculture Education Scholarships

3h) Support agricultural education and leadership

4h) Support legal issues regarding property rights

5h) Start up grant for education corporation for agriculture

**Schedule J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

► **Complete if the organization answered "Yes" to Form 990,
Part IV, line 23.**

► **Attach to Form 990** ► **See separate instructions.**

OMB No. 1545-0047

2010

**Open to Public
Inspection**

Name of organization
Florida Farm Bureau Federation

Employer identification number
59-0642950

Part I Questions Regarding Compensation

1a 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 |
| ☐ Tax indemnification and gross-up payments | ☒ Health or social club dues or initiation fees |
| ☐ Discretionary spending account | ☐ Personal services (e.g. maid, chauffeur, chef) |

b If any of the boxes on line 1a are 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

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?

3 Indicate which, if any, of the following the 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 of compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment from the organization or a related organization?
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?
c Participate in, or receive payment from, an equity-based compensation arrangement?
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

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?
b Any related organization?
If "Yes" to line 5a or 5b, describe in Part III.

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?
b Any related organization?
If "Yes" to line 6a or 6b, describe in Part III.

7 For persons 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

8 Where 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 Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1a		
1b	X	
2	X	
3		
4a		X
4b		X
4c		X
5a		
5b		
6a		
6b		
7		
8		
9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

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, lines 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-Misc Compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(I) Base compensation	(II) Bonus & incentive compensation	(III) Other reportable compensation				
(1) John L Hoblick	(i)							
	(ii)	146,676.				32,570.	179,246.	
(2) W. Patrick Cockrell	(i)	148,149.				40,275.	188,424.	
	(ii)							
(3) Ben Parks	(i)	146,214.				42,740.	188,954.	
	(ii)							
(4) Roy Singleton	(i)							
	(ii)	122,275.				46,184.	168,459.	
(5)	(i)							
	(ii)							
(6)	(i)							
	(ii)							
(7)	(i)							
	(ii)							
(8)	(i)							
	(ii)							
(9)	(i)							
	(ii)							
(10)	(i)							
	(ii)							
(11)	(i)							
	(ii)							
(12)	(i)							
	(ii)							
(13)	(i)							
	(ii)							
(14)	(i)							
	(ii)							
(15)	(i)							
	(ii)							
(16)	(i)							
	(ii)							

Schedule O

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2010**Open to Public
Inspection**

Name of the organization

Florida Farm Bureau Federation

Employer identification number

59-0642950

Part VI, Line 6 - Organization has members or stockholders

Florida Farm Bureau Federation is a membership based organization.

Part VI, Line 7a - Persons/Groups who can elect any members of governing body

The members elect the President, Vice President and Board of Directors at our annual meeting.

Part VI, Line 7b - Governing body decisions are subject to approval by:

The opportunity for members to challenge or question the actions of the governing body is made available in the general business sessions and the policy development segment of the annual meeting.

Part VI, Line 11a - Process used by the organization to review this 990 return

Prior to mailing, the 990 is reviewed by the Audit Committee and management.

Part VI, Line 12c - Monitoring and enforcement of conflict of interest policy

The organization, through the Assistant to the President, monitors any conflicts of interest that may arise.

Part VI, Line 15b - Compensation review process

Vice President, Treasurer and Secretary serve as compensation committee for the President/CEO. They review comparables with other associations in similar positions.

Part VI, Line 19 - How org makes Documentation, Policies, and Statements public

As an organization exempt under the IRC 501(c)(5) we are not required to make our governing documents, conflict of interest policy or financial statements available to the public. Our members are able to obtain these documents upon request.

Name of the organization

Florida Farm Bureau Federation

Employer identification number

59-0642950

Part VI, Section C, Line 20 - Person in charge of books and recordsRobert Richardson
(352)374-15715700 SW 34 Street
Gainesville, FL 32608Part XI, Line 5 - Reconciliation changes in net assets or fund balancesEarnings of Affiliates 584,188; Tax Expense -28,909; Non Controlling Interest in
Affiliates 1,033; Rounding 3

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization

Florida Farm Bureau Federation

Employer identification number
59-0642950

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) _____					
(2) _____					
(3) _____					
(4) _____					
(5) _____					
(6) _____					

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?
(1) Florida Farm Bureau Scholarship Fund 5700 SW 34th St Gainesville, FL 32608	813000	Florida	501(c)(3)	Line 11a	FFBF	X
(2) _____						
(3) _____						
(4) _____						
(5) _____						
(6) _____						
(7) _____						

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

Part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) _____												
(2) _____												
(3) _____												
(4) _____												
(5) _____												
(6) _____												
(7) _____												

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) Florida Farm Bureau Enterprises 5700 SW 34th St, Gainesville, FL 32608	561000	FL	FL FB Fed	C			100%
(2) Florida Agricultural Marketing Assoc 5700 SW 34th St, Gainesville, FL 32608	424400	FL	FL FB Ent	C			100%
(3) Florida Farm Bureau Holding Corp 5700 SW 34th St, Gainesville, FL 32608	551112	FL	FL FB Fed	C			73%
(4) FFBF Investment Corp 5700 SW 34th St, Gainesville, FL 32608	551112	FL	FL FB Fed	C			100%
(5) Florida Farm Bureau Agency 5700 SW 34th St, Gainesville, FL 32608	551112	FL	FL FB Fed	C			100%
(6) _____							
(7) _____							

Schedule R (Form 990) 2010

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		1a ☒
b Gift, grant, or capital contribution to other organization(s)		1b ☒
c Gift, grant, or capital contribution from other organization(s)		1c ☒
d Loans or loan guarantees to or for other organization(s)		1d ☒
e Loans or loan guarantees by other organization(s)		1e ☒
f Sale of assets to other organization(s)		1f ☒
g Purchase of assets from other organization(s)		1g ☒
h Exchange of assets		1h ☒
i Lease of facilities, equipment, or other assets to other organization(s)		1i ☒
j Lease of facilities, equipment, or other assets from other organization(s)		1j ☒
k Performance of services or membership or fundraising solicitations for other organization(s)		1k ☒
l Performance of services or membership or fundraising solicitations by other organization(s)		1l ☒
m Sharing of facilities, equipment, mailing lists, or other assets		1m ☒
n Sharing of paid employees		1n ☒
o Reimbursement paid to other organization for expenses		1o ☒
p Reimbursement paid by other organization for expenses		1p ☒
q Other transfer of cash or property to other organization(s)		1q ☒
r Other transfer of cash or property from other organization(s)		1r ☒

	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) Florida Farm Bureau Agency	A	209,930	
(2) Florida Agricultural Marketing Association	A	86,938	
(3) Florida Farm Bureau Agency	I	139,122	
(4) Florida Farm Bureau Enterprises, Inc	N	95,732	
(5) Florida Farm Bureau Enterprises, Inc	O	464,750	
(6) Florida Farm Bureau Enterprises, Inc	P	445,148	

Schedule R (Form 990) 2010

Part VI **Unrelated Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproportionate allocations?		(g) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner?	
			Yes	No		Yes	No		Yes	No
(1) -----										
(2) -----										
(3) -----										
(4) -----										
(5) -----										
(6) -----										
(7) -----										
(8) -----										
(9) -----										
(10) -----										
(11) -----										
(12) -----										
(13) -----										
(14) -----										
(15) -----										
(16) -----										

SCHEDULE O
(Form 1120)

Department of the Treasury
Internal Revenue Service

**Consent Plan and Apportionment Schedule
for a Controlled Group**

▶ **Attach to Form 1120, 1102-C, 1120-F, 1120-FSC, 1120-L, 1120-PC, 1120-REIT, or 1120-RIC.**
▶ **See separate instructions.**

OMB No. 1545-0123

2010

Name

Employer identification number

Florida Farm Bureau Federation

59-0642950

Part I Apportionment Plan Information

- 1 Type of controlled group.
- a ☒ Parent-subsidiary group
- b ☐ Brother-sister group
- c ☐ Combined group
- d ☐ Life insurance companies only
- 2 This corporation has been a member of this group:
- a ☒ For the entire tax year.
- b ☐ From _____, 20_____, until _____, 20_____
- 3 This corporation consents and represents to:
- a ☐ Adopt an appointment plan. All the members of this group are adopting an apportionment plan effective for the current tax year which ends on _____, 20_____, and for all succeeding tax years
- b ☐ Amend the current apportionment plan. All the other members of this group are currently amending a previously adopted plan, which was in effect for the tax year ending _____, 20_____, and for all succeeding tax years
- c ☐ Terminate the current apportionment plan and not adopt a new plan. All other members of this group are not adopting an apportionment plan
- d ☐ Terminate the current apportionment plan and adopt a new plan. All the other members of this group are adopting an apportionment plan effective for the current tax year which ends on _____, 20_____, and for all succeeding tax years
- 4 If you checked box 3c or 3d above, check the applicable box below to indicate if the termination of the current apportionment plan was:
- a ☐ Elected by the component members of the group
- b ☐ Required for the component members of the group
- 5 If you did not check a box on line 3 above, check the applicable box below concerning the status of the group's apportionment plan (see instructions)
- a ☐ No apportionment plan is in effect and none is being adopted
- b ☒ An apportionment plan is already in effect. It was adopted for the tax year ending 06/30, 91, and for all succeeding tax years
- 6 If all the members of this group are adopting a plan or amending the current plan for a tax year after the due date (including extensions) of the tax return for this corporation, is there at least one year remaining on the statute of limitations from the date this corporation filed its amended return for such tax year for assessing any resulting deficiency? See instructions.
- a ☐ Yes
- (i) ☐ The statute of limitations for this year will expire on _____, 20_____
- (ii) ☐ On _____, 20_____, this corporation entered into an agreement with the Internal Revenue Service to extend the statute of limitations for purposes of assessment until _____, 20_____
- b ☐ No. The members may not adopt or amend an apportionment plan
- 7 Required information and elections for component members. Check the applicable box(es) (see instructions)
- a ☐ The corporation will determine its tax liability by applying the maximum tax rate under section 11 to the entire amount of its taxable income.
- b ☐ The corporation and the other members of the group elect the FIFO method (rather than defaulting to the proportionate method) for allocating the additional taxes for the group imposed by section 11(b)(1)
- c ☐ The corporation has a short tax year that does not include December 31

Part II Taxable Income Apportionment (See instructions)

Caution: Each total in Part II, column (g) for each component member must agree with Form 1120, page 1, line 30 or the comparable line of such member's tax return.

(a) Group member's name and employer identification number		(b) Tax year end (Yr-Mo)	Taxable Income Amount Allocated to				
			Each Bracket				
			(c) 15%	(d) 25%	(e) 34%	(f) 35%	(g) Total (add columns (c) through (f))
1	Florida 59-0642950 Farm Bureau Federation	11/06	50000	25000	47265	0	122265
2	Florida 59-1091243 Farm Bureau Enterprises, Inc	11/06	0	0	426322	0	426322
3	Florida 59-2492747 Farm Bureau Holding Corp	11/06	0	0	1279	0	1279
4	Florida 59-1033658 Farm Bureau Agency	11/06	0	0	223492	0	223492
5	FFBF 26-3787305 Investment Corp	11/06	0	0	2656	0	2656
6							
7							
8							
9							
10							
Total			50000	25000	701014		776014

Part III **Income Tax Apportionment** (See instructions)

(a) Group member's name	Income tax Apportionment						
	(b) 15%	(c) 25%	(d) 34%	(e) 35%	(f) 5%	(g) 3%	(h) Total income tax (combine lines (b) through (g))
1 Florida Farm Bureau Federation	7500	6250	16070		11750		41570
2 Florida Farm Bureau Enterprises,			144949				144949
3 Florida Farm Bureau Holding Corp			435				435
4 Florida Farm Bureau Agency			75987				75987
5 FFBF Investment Corp			903				903
6							
7							
8							
9							
10							
Total	7500	6250	238344		11750		263844

Continuation Sheet for Form 990, Part VII

► Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

Name of the Organization

Florida Farm Bureau Federation

Employer Identification number

59-0642950

Part I	Continuation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees
---------------	--

[illegible]